Thinking about children’s art production in assessment settings – developing a more socially orientated hermeneutic.

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My aim in this brief talk is to open debate on the hermeneutic or interpretative frames that adults use in relation to children’s art production by presenting a small part of a much larger research project concluded in 2011 (Tipple, R. A. 2011). I want to suggest that a hermeneutic that is more socially and culturally orientated might help us in understanding the art production in therapeutic and clinical settings in fresh and helpful ways. As well as helping in appreciating the subjectivity of children who are undergoing assessment, this fresh approach might help us understand our own subjectivity in institutional contexts and how this impacts on the practices we, art therapists, adopt, and the art work that is produced in the presence of the art therapist.

I have noticed in relation to children’s drawing and art making that psychologist’s, for example, often place emphasis on the cognitive achievement that drawing represents and that psychiatrists look for signs of pathology in the art product, whereas psycho-
dynamically orientated therapists might look for the expression of unconscious phantasy or intentionality. In the British art therapy literature emphasis is given to exploration, the art therapist and the client/artist together “in partnership” seek to understand the work, “the art process and product” in the setting (see Case, C. and Dally, T. 1992).

The British art therapy approach, which emphasises collaboration and openness, remains attractive to me. But what I hope I shall show, is that I found it was often difficult to establish relations of mutuality or solidarity with the children with whom I worked. Often, because of their difficulties with communication and their problems with social understanding, partnerships were hard to achieve. Furthermore the assessments, which were aimed at helping the team reach a diagnostic decision and provide remedial recommendations, and/or give an account of “strengths and difficulties”, were brief and the therapist was expected to focus on the questions that the referral had raised. In this setting, where the art therapist is constrained to deliver a particular report to the institution, Case and Dalley’s proposed method seemed ideal rather than practical.

As can be seen I am concerned with “context” and representing a context requires interpretative effort. The table below lists members of the Multi-discipline team:

- Paediatrician
- Child and Adolescent Psychiatrist
- Clinical Psychologist
- Educational Psychologist
- Speech and Language Therapist
- Physiotherapist
- Special Needs Teacher
- Social Worker
The list reflects the moment when I joined the team, the position I found myself in. This team composition was not permanent, sometimes the service employed less professionals than at others. Over the years the tendency was for the team to shrink. The team was organised to assess individual children in relation to “pervasive developmental disorders” (DSM IV 1994) especially Autistic Spectrum Disorders. By arranging the list in this order I have represented here a hierarchy, representing not just pay and status, but also the authority invested in particular discourses, i.e. practices and languages. The top three or four in the list are regarded as having some more rigorous and formal methods at their disposal. Their approach would be regarded as “scientific” and their statements carry a particular social endorsement, or if you prefer, authority and validity. The psychologists, the speech therapist, the physiotherapist and the occupational therapist, all used formal assessments, formal assessments that compared children's performances against a norm. The art therapist and the music therapist were employed because the team wanted to be able to describe a child's social behaviours and communication in a less formal space, responding to an interaction that was less structured. The list also illustrates how the child is divided into different functions or developmental domains in the assessment practices, including the reports that were produced, for example, mental processing or cognitive functions, speech and language, fine and gross motor movements. Diagnosis was given value by the team but it was thought that diagnostic decision should be based on a complete assessment and that to be able to make any remedial recommendations a child's particular profile of strengths and weaknesses was required.

The aim, if not articulated in these terms, is that a coherent subject is produced at the end of the process, through the practices of assessment, the writing of reports and the making of recommendations. We could also say, providing we can equate
“developmental disorder” with “illness”, that a particular purpose established by medical practices is being fulfilled here, the desire to “unravel the principle and cause of an illness through the confusion and obscurity of its symptoms, know its nature, its forms, its complications” (See C.L. Dumas E'loge de Henri Fouquet Monthellier 1807 – in Foucault 1963 P107).

Before proceeding with this interpretation of context I need to say something more about my research, in particular the frame and motivation which ordered the collection of material and guided analysis, that is, the methodology employed. As I indicated at the beginning of this report my interest is in “subjects and subjectivity”. By subject I intend to refer to that individual referred to or represented, produced in a text or a practice - “The subject or bearer of psychological states and processes, the human subject” as Hegel puts it, a “performer of actions and activities”. Subjectivity is shorthand for that experience of being a particular subject for others - “the rational subject’s reclamation of its external objectifications” (see Inwood, M. 1992 P280 & 283)

In this instance we are considering the relation of the subject to context and social practices, both in terms of the production or construction of the subject and context, but also in terms of the subjectivity experienced by subjects engaged in social practices. The practices here being the practices of assessment where there is a production of and consumption of documents, video recordings, and visual artefacts, drawings, painting, and objects made from clay.

In looking for the subject and in attempting to understand subjectivity I undertook a discourse analysis of three different kinds of material, clinical documents, art products and video recordings. Video recordings were used in the art therapy assessment, when parents and children gave permission, in order to be able to examine social interaction and communication in more detail. In this brief presentation I will be focussing on
documents and the “Documentary Subject” which the documents produce, and the “Discursive Subject” which a transcript of the videos provides. The art products shown here, in figures 1 to 4, are drawings made from the video, which attempt to capture the chalk drawings made on a blackboard which were rubbed out. A description of the experience of having viewed the art products, that is after taking a long look (Gilroy, A. 2008), in the research I referred to as the “ekphrastic subject” (Mitchell, W. J. T. 1994). This view of the subject will be less in evidence in the extracts that I show but already the drawings (figures 1 to 4) done by the therapist/researcher could be regarded as ekphrastic in nature or intent, in that they represent a translation of a visual experience, a translation of what was seen.

Althusser (2003), when discussing the ‘Theory of Discourses’, argues that it is possible to differentiate between the structures of discourses through their relation to the subject. He identifies four discourses; scientific discourse, aesthetic discourse, ideological discourse, and unconscious discourse (i.e. psychoanalysis). The notion of the subject appears in ideological discourse, it is absent in scientific discourse, and the subject appears as a lack in unconscious discourse. In aesthetic discourse the subject is present through the combination of signifiers, in an “ambiguous structure of cross-references” (Althusser 2003 P50) – there is an absence of a centre in aesthetic discourse. The case studies, I like to think, in my research, take the form of an aesthetic discourse, where the subject is dispersed across different sites, present in my analysis of reports and other documents, in my look at art production, and in the analysis of the exchange of messages recorded on the video, without disclosing an essential being or synthetic whole.

I will now present below some documentary material and analysis from my account of Annie who was aged 5 years 8 months when referred for assessment.
Annie was referred for an “assessment of needs” by an Educational Psychologist who describes Annie as having difficulties with fine motor skills and complex instructions. He reports that Annie fails to take turns in conversation, but she was observed to have a wide vocabulary and expressive grammar, and she was able to tell parents about events at school although her articulation was not always clear. Annie is described as not always responding immediately to questions and will say “I am not Annie now I Biff and Chips” in order, the adults say to avoid “tasks in hand”. Parents report that it is difficult to gain Annie’s attention but she shows good attention for self-directed activities. In the classroom she sat at a table but did not work.

This extract shows that children are referred because their difference represents a problem for the adults. The child is not responding to adults as anticipated, by both parents and teachers. The normally developing and reasonably compliant child seems missing in this description and family unity has been disturbed. In this documentary subject the developmental markers (functions), which are bought into play, include fine motor skills, verbal abilities and attention.

The documents also say that Annie’s poor social skills prevent her from participating in co-operative play with other children, and the Educational Psychologist reported that her play was “somewhat repetitive”, she did not talk to her doll and showed few signs of symbolic play. In contrast at home, Annie is reported as pretending to be a teacher taking the register. Annie loves books and retells stories and can copy shapes. Drawings seen by the Educational Psychologist are described as containing circles, vertical and horizontal lines. When the Educational Psychologist asked Annie to talk about her drawings she gave the names of the colours, but when the class teacher asked about the same drawing she said it was her brother, her sister and her dad.
Here we can see that although abnormal or unnatural aspects to her presentation are described, natural attributes do not go unobserved, especially by her parents. But also we see that Annie is constructed or constituted as a subject differently through her encounters with different individuals, e.g. when responding to the class teacher in relation to her drawing, as compared to her response when questioned about her drawing by the Educational Psychologist.

The referral is summarised in the documents with the following: whilst Annie has made progress in her development she continues to have “complex needs which have features of general delay, specific language disorder and features of social communication difficulty”.

Here we see how a particular language is used to describe a difference, an unusual presentation that is problematic for the adults, professionals and parents.

I would now like to discuss a story “Only one woof” by James Herriot (1985) – illustrated by Peter Barrett for children, as explored in Hodge and Kress 1999 Pages 231-239, from a social semiotic perspective. Mr Wilkin, a farmer, breeds sheepdogs and he has been very successful in this. At the beginning of the story he is with the two dogs he kept from the last litter, Gyp and Sweep. He explains to the vet and the reader that Gyp is an unusual dog, he has a floppy ear and one that sticks up, a brown patch and he has never barked. Sweep is presented as being more advanced than Gyp in training and Sweep as the more normal dog, in terms of development, is sold on to work as a sheep dog. A “classificatory system” has been introduced into the story of “usualness/normalness and unusualness/non-normalness” (P234) Hodge and Kress tell us.
Two years pass and Mr and Mrs Wilkins attend a sheep dog trial in which Sweep is participating. Gyp also attends the trial and he is shown in an illustration tied to the bumper of The Wilkin’s car, sitting and watching. When Sweep enters into view and begins his trial Gyp rises to his feet and when Sweep completes his trial and is praised Gyp barks, “a single loud bark” – “which echoed around the field” (P232). Sweep becomes a champion but Gyp becomes usual “by demonstrating his quintessential dog-likeness in barking” (P234). The story ends six years later when the vet attends the farm. In a final illustration Mrs Wilkins is shown, arms folded and looking down, smiling affectionately at Gyp, whilst the vet looks on, also smiling affectionately. Mrs Wilkins makes a comment: “poor old lad. Eight years old and only one woof” (P232). In this illustration the movement is towards a restoration of normality to a resolution of a disturbance, in the female presence. The previous classificatory system, of “usualness/normalness and unusualness/non-normalness” has been transcended allowing Gyp to be replaced back into the category of the natural.

It is a parallel process to this story, a process of transcending or translating categories (usual/normalness versus unusualness/non-normalness) and reconciling differences whilst producing a subject child, in his or her oppositions, difficulties, problems, developmental delays, powers and abilities, that we can trace in the documents - in what I called in my thesis the “Documentary Subject”.

I will now give consideration to the “Discursive Subject” – my analysis and response to the video material examined in my research, and here I hope you will see how, the focus on oppositions and difficulties, problems, powers and abilities, found in the Documentary subject affects the therapist and child in the assessment.
Annie drew this figure on the blackboard with chalk. The figure was drawn first followed by the vertical lines with the little loops above the figure. When drawing the lines Annie spoke softly.

Annie: Annie P and P and P Annie P.

Therapist: What does that say?

Annie: And P.

Therapist: Can you write your name Annie?

Annie: I can.

Therapist: How do you spell it?

Annie: Annie P.

Therapist: Show me.

Little attention is given to the pear-shaped figure instead Annie and the therapist focus on the P shaped forms which suggest writing. Reading and writing are of course, in many cultures, particular markers of development, of the acquisition of a competence and of a rationality and cognitive capacity. Writing one’s name establishes identity. The therapist wants to comment on Annie’s capacities in his report – it is expected of him. Just as Annie wants to present herself as competent so he wants to be regarded as competent – in terms of his ability to conduct an assessment professionally. He encourages Annie to give a further demonstration of her writing skills.
Annie does not respond to this encouragement and instead rubs out the previous drawing and draws a “ghost” – Figure 2.

Fig 2.
She spoke as follows:

Annie: Right now who remembers to draw a ghost.

Annie: [softly] You remember to draw a ghost.

Annie addresses herself in the third person here, as if she were an adult giving instructions. This assumption of adult authority reverses the usual power relation and shifts the topic away from writing. Annie also demonstrates her abilities, that is, that she is able to draw a ghost, she can introduce this fearful object into the exchange of messages. The face of the ghost is very simple but effective in being ghost like.

The ghost is rubbed out and Annie next draws lines with little loops – or we could say produces her version of writing (Fig 3.)
Fig 3.

Annie: Now chalk has a mess.

Therapist: What's those bits?
Annie: It’s my name.

Therapist: It’s your name is it - it looks like the letter P.

Annie: Oh it’s daft.

Therapist: It’s daft is it?

Annie: Yeah.

Annie is aware that her repeated form, which despite having difference and variety, will not serve as writing. “Oh its daft” – it is not what is required. Annie rubs out the lines and the therapist introduces a copying task, hopefully to persuade Annie that she can learn to reproduce letters. He encourages her to reproduce the letter R.

Therapist: Can you do this one look this is an easy one to do?

Annie: No not easy.

Annie shakes her head and walks past the therapist and back to the blackboard and then rubs out the R with a duster. The therapist tries other simpler lines but these are also rubbed out by Annie.

Annie: Nooo we’d like to see daddy.

Therapist: I want to see if you can do some lines like that – can you show me?

Therapist: Come on here’s the crayon.

Annie: My fine folder [here Annie becomes inaudible and the transcription is doubtful].

Therapist: Sorry here’s the chalk.
Annie: That’s nasty [spoken quietly].

Therapist: Well get your own piece then and use one of those.

In this exchange the therapist becomes persistent and seems determined to exert direction whereas Annie presents herself as a recalcitrant child and plays the part accordingly. The therapist expresses his exasperation with “well get your own piece then…” Not exactly a therapeutic intervention, we might say. When Annie makes her appeal to higher authority, asking to see “daddy” she walks on her tip toes holding out her blue dress with one hand in front of the therapist and camera. She smiles and looks at the therapist shaking her head when he holds out the chalk for her to use. She is superior in her disdain, but this cool and confident performance hides her anxiety that the adult imposed task generates. It is the therapist who is “nasty” with his persistence, not just his chalk.

Annie keeps control of the rubber and rubs out the therapist’s lines and moves the developing text forward with this drawing - Fig 4.
Fig 4.
Annie: Now made rubbers lying there now after you write your name start doing a lovely picture of Christmas where you had your presents.

Annie: Now this is baby Jesus 'cause you know you can’t do it can you.

Annie: Right now [spoken quietly].

Annie: This is called um.. [spoken quietly].

Therapist: That's baby Jesus yeah.

Annie: Yes 'cause you’ve got to draw lovely of the stable now if you do it Jesus if you finish your stable come to me and write your name then but I don’t want it squiggled [emphasis is given to the word “squiggled”].

Here Annie uses gesture and speech to create an imaginary situation. She becomes a teacher and it appears that the therapist is the pupil who must avoid “squiggling”. Through the use of the imaginary situation Annie is able to show that she remembers how teachers behave and that she is well aware of what adults require – “you’ve got to draw lovely“ and you have to write your name. The “as if” of play allows Annie to avoid the tasks that the therapist might want to impose. The play challenges adult power but also gives Annie the opportunity of articulating her experience, her subjectivity, her position as a subject child who is required to demonstrate a cultural competence through the completion of a drawing/writing task.

The drawing of baby Jesus does, especially when compared with the ghost, suggest the vulnerability of the powerless; the vulnerability that Annie feels when she cannot gain the skills and understanding that would enable her to access the code that the adults use and require her to master.
What we can see is that the story in the documents frames the assessment encounter where the exchanges and communications between the art therapist and the child produce messages, messages that form another text. This text is affected by the documentary story and it develops the production of subjects and subjectivity (the subject of the child and the therapist, and their respective subjectivities).

This is how Jakobson (1960) sees communication:

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Context

Message

Addresser  ---------------------------------------------------------------  Addressee

Contact

Code
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This structure implies that, if communication is to be successful it requires agreement in relation to context and code. This is necessary before any message can be deciphered. A message must also have some material form or presence to enable the addressee to make contact, e.g. the sound of speech, gestures that can be seen, visual material in the form of images or writing.

Jakobson does not say this but clearly power relations affect his structure. Some addressee’s are prohibited from the production of some messages, e.g. in the team
individuals are regarded as having their domain of expertise, an area on which they can make comment on and be heard. Access to particular codes may be limited, e.g. access to the interpretation of formal assessment results, speech and language tests or mental processing examinations. In relation to the exchanges between adults and children, children are not expected to assume authority and give directions although they may “play” this role. In this way some messages may be regarded as null or void. We could see that, in relation to code, Annie, through her drawing develops her own personal code, which is not always immediately accessible to others.

Annie does demonstrate an ability to give her communications material form, she uses gesture voice and the chalk and rubber and she successfully creates messages. There maybe some difficulty with codes and an ambiguity results, but Annie is particularly aware of the power relation in the situation and aware that she has to demonstrate some ability in this setting – that communications refer to the context. Demonstrating some ability would enable her to present a self that gains affirmation from the adults, allowing for the construction of a positive identity.

To summarise the clinic documents show that the child’s developmental trajectory is under examination and is compared to others, to a normal trajectory, one which culminates in the development of cognitive capacity, a capacity that facilitates communication and which enables social integration, cultural competence and an adult rationality to emerge (see Jenks 1996). Knowledge of this competence and rationality is held by the adults, collectively and individually. The child like “Sweep” and “Gyp”, the sheep-dogs in the story, is prepared for a productive future, a productive future that requires a particular kind of rationality. The documents and the assessment are aimed to disclose the emergent rationality of the child, and the identification of developmental successes, reverses or delays. These objects are generated in the practices of the clinic, including, as we have seen by the practices of the art therapist.
Often the capacity for developing rationality is treated solely as a biological given, a potential inherent in human form. Rodin’s sculpture Le Penseur (1902) comes to mind where thinking is represented as an individual achievement, the figure is solitary and his (this is a gendered image) activity appears to have no relation to exchanges with the world of things or others (see Schraube, E. and Sorensen, E. 2013). This image, which I want to suggest is ideological and political in nature, it haunts developmental discourses, discourses that produce as inevitable and natural an entrepreneurial adult who generates his own cognitive and creative achievements from his native endowments.

Hopefully I have shown how the ideological makes it appearances in assessment practices and discourses, how it affects the art production and the developing assessment text. How the child uses art making to explore and manage, what is for her, a difficult situation, and in this way gives expression to her subjective experiences, to her subjectivity, a subjectivity which is continuously changing and developing, as she engages with others and with things in her environment.

This contextual understanding of human subjectivity that I am trying to develop here, I want to suggest, should influence the development of our interpretative frames, the hermeneutic that we employ in relation to children’s art making.

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**References**


*American Psychiatric Association. Washington D.C.*


