

# **ATOL: Art Therapy OnLine**

**Book Review by Laura Richardson**

**Time Limited Art Psychotherapy**

**Edited by Rose Hughes**

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Anyone who has pondered the question of therapeutic models in art therapy, and its duration, will welcome this excellent book. It meets a lack in the literature, and combines being both scholarly and practical. The writers directly address practitioners who seek effective, measurable and timely ways of working, in what is an enduring and deepening climate of austerity in UK public services.

All the contributors view the development of time-limited art therapy as both a challenge, and an opportunity to make this approach more widely accessible and available than psychotherapy has traditionally been, and to include those to whom it might not ordinarily be offered. One gains the impression of a group of practitioners

who, from experience, have needed to be adaptable and creative, and have thrived on it. They highlight the chance to develop adapted approaches for people with specific difficulties, that are more focused and more conducive to research than less directive models, and there is a positive generosity of spirit in the way they share their learning for the collective benefit of the profession.

Balancing an understanding of the literature with the logistics of working with service-users in NHS contexts is a task of considerable complexity. Springham (pp. 11,13), Wood (p. 28) and Thorne (p.116) all spare thoughts for the newly-fledged art therapist navigating their way between the case studies, the widely varying definitions of what constitutes brief therapy, the exceptionally harsh realities of many service-users' lives, and the limits of the possible. Thorne (p.116) and Atkins (p.119) are both mindful that the "scripted" quality of the focused interventions they suggest may feel alien to art therapists used to more spontaneous psycho-dynamically informed practice, and many of the writers helpfully describe something of their learning and familiarisation process.

This collection of writings challenges the received wisdom that people with complex difficulties require longer term therapies (Wood: p. 29), frequently a tension point between those providing therapy in public settings and the services in which they work. Atkins (p.137) finds Winnicott (1962) inspirational on this matter in his motto "How little needs to be done?", by which he meant that his aim was to do simply and economically what was necessary to help people back to daily life again. Huet (xiv) and Springham (p.13) identify that historically, many art therapists were left with the demoralising impression of there being a "gold standard" (i.e. longer-term, non-directive analytic art psychotherapy) that they have no possibility of meeting. This book has a more encouraging message, offering numerous ideas on how art therapy can be integrated with a range of time-limited approaches to psychotherapy for example; cognitive analytic therapy, mentalisation based therapy, the recovery model, solution focused brief therapy, time-limited group work, and cognitive behavioural therapy. They describe a two-way process whereby art therapy can gain focus from a blend of time-limited models that can be extended to those who find difficulty with words.

The need to harmonise the planning of art therapy with the logistics of; service protocols, allocation of care co-ordinators, transitions between teams, multiple referrals, family needs, return to school or work, relapses and admissions, concentrates the therapist's mind on how to form respectful and effective therapeutic relationships that do more good than harm, and also fit the care episode. The subject of time-limited art therapy touches on the context in which the therapy takes place, the art therapist's relationship with the service, and service design as well as the relationship between the art therapist and the service user.

Springham (p.17) clearly recognises this and wisely recommends giving priority to achieving congruity with the providing service. He also encourages art therapists to become sufficiently "au fait" with service commissioning to be ready to explain it to service users. This democratic spirit harmonises with Wood's (p. 28) discussion of empowering service users through collaborative working relationships characterised by the "recovery approach" and respectful attention to what they say. Rothwell and Grandison (p.180) stress the necessity of designing flexibility (between acute and community) into art therapy services with the aim of increasing the effectiveness of the brief spells of art therapy that vulnerable people receive in acute care. Thorne (p. 94) makes a pragmatic case for developing replicable time-limited art therapy approaches that are measurable, so that effectiveness can be reliably researched. Hughes (p. 47) recognises that courage is needed to introduce new models to accustomed ways of working, but she finds that the result promotes creativity and offers real benefits to service users in the form of faster responses and shorter waits.

"Time Limited Art Psychotherapy" is a welcome book which meets some of the current challenges for art therapists with energy, creativity and a wealth of departure-points for further innovation and effectiveness research. The overall message of this book is that considering the time factor, alongside quality and effectiveness, has the potential also to transform and level therapeutic relationships and also encourage the development of better understanding of art therapy's effectiveness.

## **Biography**

Laura Richardson came to art therapy via a lifelong commitment to the arts, a degree in English and American Literature and a background in volunteering. She was a member of the class of 87-88 on the University of Sheffield postgraduate diploma in art therapy course. In 2006-2007 she added to this an MA in Art Therapy Research from the Art Therapy Northern Program, where she wrote her dissertation about time-limited approaches to art therapy in community mental health. Laura also has a fine art degree and a diploma in management from Sheffield Hallam University. She has worked as an art therapist in Sheffield for 27 years with experience in the voluntary sector, private practice, social services, and the NHS. She currently holds a post with Sheffield Health and Social Care NHS Foundation Trust as Professional Lead for Arts Therapies and she also has a role as Arts Lead for the Trust.

## **Bibliography**

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