

Art therapy

Hands-on work bridges gaps in communication, troubles

By Theresa Wulf

When she was growing up in a “silent home,” Lynn Flint found that art became her bridge between the feelings inside she had to express and the “don’t talk” world outside.

Now that she is one of Nebraska’s four art therapists, Flint again uses art to help her clients cross the bridge from the difficult emotions and issues they are trying to resolve to the healing process.

Flint has been a therapist for Lutheran Family Services in Grand Island since Sept. 4. She has a bachelor of arts degree in art education from Hastings College, and a master of science in art therapy from Emporia State University in Emporia, Kan.

“To find out why I became an art therapist, you have to go back to my home,” Flint said. “I grew up in a silent environment. There was no noise.”

A “silent environment” is one in which one or both parents demand silence in the home, she explained. “That happened to be my father. And I mean that in the extreme sense.”

Because of the demand for silence, Flint said she didn’t learn a lot of conversation and interaction skills as she grew up.

“I used a lot of imagination and fantasy. My mind was my playground,” she said. “I really developed my non-verbal skills and learned how to relate them to behaviors.”

That, and hearing a phrase that was popular in the 1970s, planted the seeds for Flint’s career, she recalled. Hearing the phrase “job burnout” led her “to pick a job that would incorporate a work and play attitude.”

“When I started college, they’d never heard of art therapy,” said Flint. “It was purely by instinct that I started to find my profession. And when I did find art therapy, it was like coming home.”

Flint’s technical definition of being an art therapist is: “A human service profession that offers the opportunity to explore personal problems and potentials through verbal and non-verbal expression, and to develop physical, emotional and learning skills through therapeutic art experience.”

She notes that this is an open-ended definition. “Each art therapist brings to the profession her own definition.”

The types of people who can benefit from art therapy are as varied as the settings in which it’s done, Flint added. “We work with all ages in all settings – hospitals, schools, clinics, nursing homes.”

Art therapists’ materials also vary. “Whether you have a limited or liberal budget, you should try to provide materials that range from least to greatest control: pencil and papers, colored pencils, thin and thick markers, magazines for collage, oils, clay and watercolors.”

Some of the bigger art therapy programs get into sculpture, Flint said. Many art therapists also use textiles such as feathers, shells, noodles, etc.

Like her childhood art, Flint uses artwork as a bridge in therapy, she said. “Artwork gives me indicators of what a

client is ready to talk about, or what they’re not ready to deal with now.”

For example, she will ask someone who’s getting divorced to make a collage about how they are feeling about the divorce. At the end of the session, they’ll look at the picture and piece together the emotions in the artwork.

“I also see children whose parents are getting divorced, and I want to help them see the reasons for the divorce,” said Flint. “I ask them to draw what they want to happen and what they think the outcome will be.

“A lot of times they know it will not work out,” she said. “The art gives me a perspective on what they want to happen and what’s going to happen.”

Art therapy also is effective in group relationship therapy, said Flint.

“It’s real fascinating when I work with a family,” she said. “How they interact when they are working on the art reflects how they are working together at home.”

Quality art therapy doesn’t mean a patient has to produce masterpieces, Flint noted.

“My goal as a therapist isn’t to expect my clients to draw wall-worthy art. It’s to reflect honestly what’s happening,” she said.

However, she added, “as a client starts to gain control of a situation, his artwork starts to reflect this and gets better. A lot of patients continue to work on it and become artists in their own right.”

Art therapy is a wonderful “buffer” and interpretive tool in Flint’s work, but she cautions against putting too much or the wrong kinds of meaning into people’s art, especially that of children.

“Every client begins to develop personal symbols. Emotions do not fit into recognizable shapes,” she said.

“These personal symbols are recorded in a ‘symbol dictionary,’ i.e., a color equals hope, a line equals anger, etc. Although some symbols are universal, each client is unique. Blanket theories are assuming, dangerous and underestimate uniqueness.”

Children can reap the benefits of art therapy in their schools with the help of a good art teacher, Flint said.

“I think the art room is such a wonderful place to teach kids about themselves. Schools sometimes do a lot to teach kids about the basics, but fail to teach a lot to kids about who they are.

“There’s a lot art teachers can do to be therapeutic. They can have kids draw a self-portrait and write a reaction paper to it, or do a portrait about how you see yourself, then another portrait about how others see you.”

Just as clients must continue to progress, so must art therapists, said Flint.

“It is important for the therapist to continue exploring their own life through art,” she said. “Some therapists display their own art in the art therapy room, and allow clients to view all stages of its development.”

Surgeon speaks to teacher through his artwork, 'poetry'

By Theresa Wulf

Dr. Hiram Hilton was a Lincoln surgeon with Alzheimer's disease. It had progressed to the point where he didn't recognize his wife, his kids, his shoes or his home.

But Hilton was in there, and Reinhold Marxhausen knew it. And through Marxhausen's art lessons, Hilton and Marxhausen talked.

Marxhausen met Hilton about 10 years ago when he was asked to teach art lessons to a support group of disabled husbands and their wives, the artist said. About four couples were in the group when he took over.

When he taught, Marxhausen would set up a still life, and teach the couples to paint it. "I noticed right away that Hiram didn't know what I was talking about," he said.

Then one day, as Marxhausen was leaving, he scooped up his pupils' papers and began to head out the door. And Hilton, who couldn't tell his socks from his coffee cup, looked up and pointed at the papers in Marxhausen's hand and said, "Those are mine."

"That was the first time I realized how important those pieces of paper were to him," Marxhausen recalled. "That got me going."

So Marxhausen kept working with Hilton. "While the rest of the group worked, I would work one-on-one with him," said the artist. "Clay didn't work. We did some collages. Or we'd draw together. I would draw something, then he would do it."

Marxhausen said he realized further how he was reaching the surgeon the day they had a sewing lesson. Marxhausen put a piece of cloth in an embroidery hoop, then drew a red line down the middle of it.

"Immediately, he took the needle and stitched up the red mark," Marxhausen said of the former surgeon. "All of a sudden, I had tapped into a part of him with that piece of cloth."

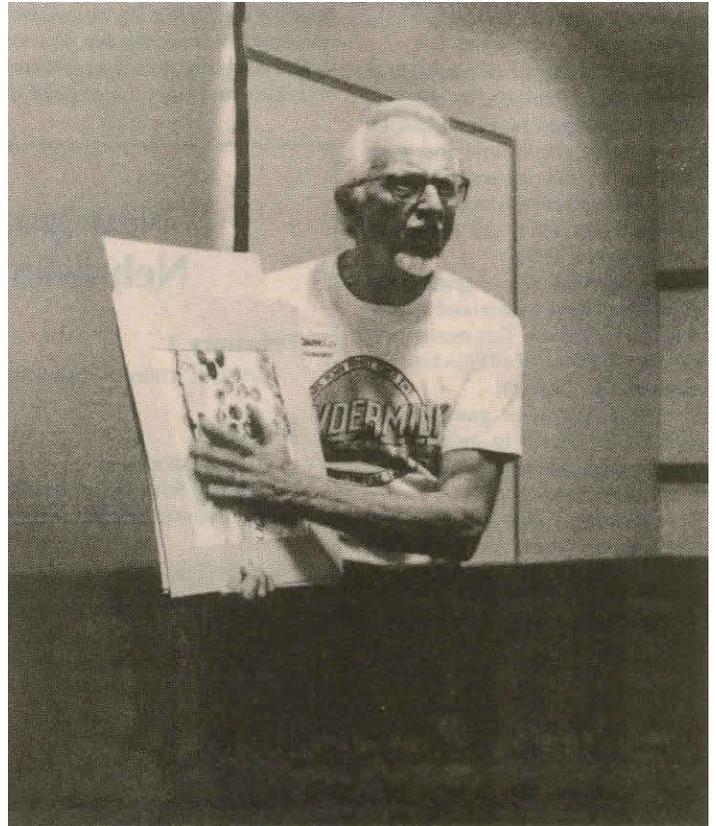
One day, while the men were drawing together, Marxhausen drew a head on a piece of paper, and Hilton drew one beside it. As Marxhausen filled in the features, so did Hilton.

"When we were done," Marxhausen said, "Hiram drew an arm on his body that went around my head, like a hug. It was a wonderful moment. I'll never forget that."

Through their artwork together, Marxhausen also discovered that Hilton was a "poet."

"I noticed that Hiram was writing, and that he liked to write. So I gave him some papers to write on, and I called it his poetry because he was expressing himself," Marxhausen said.

"I called it 'writing in tongues,'" he added. "Nobody else knows what they mean."



Reinhold Marxhausen tells about his art therapy sessions with Hiram Hilton, M.D., a Lincoln surgeon with Alzheimer's disease. (Photo by Theresa Wulf)

Although the writing was illegible, Marxhausen found it beautiful enough to make a leather-bound book filled with nice paper. He gave it to Hilton and asked him to fill it.

Hilton's wife called Marxhausen when the book was full. But Marxhausen never saw it. It somehow was misplaced, and neither Mrs. Hilton nor Marxhausen can find it.

The medical community has responded to Marxhausen's "research." He said that he once was a guest lecturer at Creighton University Medical School's grand rounds, and that he was well-received by the more than 70 doctors and nurses who listened to him tell Hilton's story.

The research community, however, has not been so receptive.

"People who write scientific papers need footnotes and headers, that kind of thing," Marxhausen said. "I'm not that kind of guy."

Although Hilton died three years ago, Marxhausen said he lives on through his art, and the memories of the nurses and doctors who worked for him and with him.