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Research Article

Invisible complicity in LGBTQI art therapy: A series of case studies in response to Hadley's call for the need for vigilance



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A R T I C L E I N F O	A B S T R A C T
<i>Keywords:</i> Art therapy LGBTQI Feminism Sexuality Gender studies Social justice	Many creative art therapists have called for a greater awareness in our profession of social injustice and have cautioned against the invisibility of social privilege: be it by race, gender, sexual orientation or any other means. They have called for institutions to be more vigilant in including awareness of the unconscious nature of such prejudices in their art therapy training programmes and they have called on individual therapists to be more self-reflective in their practices. The author offers a response to this call and self-reflects on her own practice. She uses a series of case studies with LGBTQI clients to explore how questioning dominant narratives helped her respond more effectively to her clients' needs. The author challenges the phallocentric perception of the vagina as a hole and deconstructs the active-passive power dynamic so often attributed to penetrative sex. The author wishes to demonstrate how, despite her own LGBTQI identity, as a person who grew up within a heterosexual dominant narrative, she nevertheless introjected its values: the therapist's difficulty in negotiating this narrative can limit the potential space within the setting in terms of meaning and be detrimental to the client.

"As creative art therapists, we need to be aware of the multiple ways in which we are complicit with dominant narratives in our professions, our education and training, and in our practice." (Hadley, 2013, p.379)

Personal foreword

Hadley's (2013) paper calls upon creative art therapists to be vigilant about their complicity with dominant narratives and emphasises the need for each therapist to take responsibility in analysing themselves and their practice for signs of complicity. This paper is my response to Hadley's call. As an LGBTQI art therapist, I offer up three case studies that demonstrate the constant need for this vigilance. When we as therapists create a space in our minds that challenges socio-cultural norms, we expand the therapeutic field. This process increases the possible choices available to our client in terms of understanding and collocating their artwork's meaning. In places, my article may seem to fall outside the realm of academic discourse and become a story of subjective experience. I am a strong supporter of Stone-Mediatore's (2007) belief that the purging of emotions and personal experience from academic texts is a subtle form of censorship that continues to silence and discredit marginalised standpoints. Mohanty (2003) points out how bias most often corresponds to 'not mainstream': objective truth is another term for the universalising nature of the dominant narrative. If, as Lorde (2007b) proposes, the masters tools can never dismantle the master's house, then it is fundamental that alternative narratives are allowed alternative forms of expression.

Introduction

Hadley (2013) is by no means alone in calling for vigilance in our profession concerning the unconscious collective adherence to dominant narratives. Hocoy (2005), Talwar (2010, 2015) and Hogan (2013) in particular have each used a different theoretical framework to the similar purpose of demonstrating the utmost and universal importance of correcting this imbalance in our practice as creative art therapists and hence also in our training programmes. Burt (2003) re-asserted the feminist and post-modern feminist standpoint that what counts is not the answers but the kind of questions asked and *how* they are asked (p. 28). A common question that emerges for Hocoy (2005), Talwar (2010) and Hadley (2013) is: who is the patient and where is the illness? Where is the pathology when a black person in a racist society, or a homosexual in a homophobic society develops low self-esteem, dissociates or adopts self-defeating defence mechanisms against the oppressive system? Who or what is to be cured? More important than the potential

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answer to this question is whether or not the therapist has moved outside the dominant narrative enough to pose themselves this problem.

A deep-rooted obstacle when facing any form of unearned privilege (whether white, male, heterosexual, European etc.) is to be found in its invisibility. This is demonstrated by Hadley's (2013) classroom response where a white, heterosexual student will inevitably ask what feminism, racism and heterosexism has to do with their therapy training. Tatum (2003) notes how her non-white students, when asked about identity, will often include their racial or ethnic group while her white students rarely mention being white. My personal experience confirms the same pattern in heteronormativity: rarely has a heterosexual person mentioned their sexuality to me as defining their identity.

The invisibility of unearned privilege colludes with its *mis*recognition as objective normality (Bourdieu, 2004). Hence, dominant narratives rebuild themselves even as they are being dismantled (Hadley, 2013, p.380). LGBTQI awareness training is seen as relevant only when working with LGBTQI clients; racial awareness only when working with ethnic minorities; disability only when working with disabled clients etc. Yet we all have a body, race and sexual orientation. What if feminist and gender issues are only seen as relevant when at least one of the client or therapist is a woman? I believe this last example emphasises the implication of this way of thinking: is gender privilege no longer relevant when both therapist and client are men? What are the implications if heteronormativity is the only thinking pattern available when both therapist and client are heterosexual?

Yet this pattern of thinking has been confirmed in differing ways by two surveys: Hadley & Neil (as cited in Hadley, 2013) asked music therapists for demographic information including age, gender, race, religion, sexuality and any disability; Hogan and Cornish (2014) questioned registered art therapists in Britain about the influence of their ethnicity, gender and sexual orientation on the therapeutic relationship. Hadley (2013) reports that sexual orientation was the only field seen as irrelevant by some music therapists as a marker for identity, and some refused quite vehemently to answer this question while responding to all other identity markers (p. 379). Hogan and Cornish (2014) present an overall much more positive situation that revealed a general sensitivity and awareness among art therapists to questions concerning gender and sexuality and a need for attentiveness. Nevertheless, Hogan and Cornish (2014) notice a majority view that gender or sexual orientation would be discussed 'if' relevant (p. 129). It would appear from the context that this 'if corresponds to those situations in which the client is in conflict with the social dominant narrative. What emerges therefore is that the presence of a dominant narrative need only be brought into the picture where it creates a specific conflict with a specific client.

Hocoy (2005) emphasises the unconscious nature of the way in which the dominant voice of privilege operates, ensuring its monopoly over our conscious mind by relegating marginalised voices into what Hocoy terms the 'Collective Shadow'. He proposes that if as therapists we really wish to abide by the American Psychological Association's Code of Ethics (2002) to "do no harm", we need a sophisticated exploration of this shadow (Hocoy, 2005, p.11). Failure to do so, may result in our silencing those voices in our clients that we have allowed society to silence in ourselves.

This concept is re-iterated by Talwar (2010) with different terminology when she calls upon the use of intersectionality that demands self-reflexivity in order to contextualise the creative art therapist's cultural beliefs, values and social position, hence promoting the visibility and understanding of personal bias. I would like to offer up the results of my own self-reflectivity in the hope that it may be useful for the individual reader/therapist who may have introjected a similar dominant narrative in terms of heterosexism.

The dominant narrative of the vagina as a hole

As a white, middle-class girl growing up in Britain in the 1980s, I realise now the extent to which I introjected a phallocentric vision of the vagina as a hole. This vision can be traced back semantically to the Latin word 'vagina' that did not refer to the female body but to the sword's sheath; its meaning was extended to the sex organ in English in 1682 (Vagina, 2019). To define the vaginal canal as a 'sheath' emphasises its role as recipient for the penis-phallus and implicitly focuses on what it is *not*: its existence is validated by the sword it was made to contain. We return to notions of lack and absence. A hole.

As a Fine Art undergraduate in the 1990s, I was enthralled by the feminist art movement of the 1970s that celebrated the vagina's physical presence and variegated identity. Schneemann (1975) examined the organ from inside-out in her performance 'Interior Scroll', asserting control and ownership over its contents, while that same year Corinne (2005) took an outside-in perspective in her 'Cunt Colouring Book' inviting women to take a fresh and colourful look while identifying their vagina's personality. It became the controversial essentialist symbol of women themselves in Chicago's 'Dinner Party' (1974) while Elwes' 'Menstruation' (1979) addressed patriarchal denigration of its functions. The piece that made the most profound impact on me was Sprinkle's 'Public Cervix Announcement' (1990). She turned patriarchal objectification on its head by using love as a means to maintain the subjectivity and dignity of her body, while publicly sharing its intimacy.

And yet reviewing academic literature, Braun and Wilkinson (2001) lament how seldom the vagina is discussed and their article identifies seven persistent negative representations that include: its inferiority to the penis, its reduction to a receptacle and its connection with adjectives such as passive, absent, inadequate, dangerous, abused and disgusting. The pioneer of gender studies Judith Butler explores the idea of a lesbian phallus, but the emphasis remains on lack and on the deconstruction of phallocentric discourse: absence continues to dominate (Hsieh, 2012).

Case study 1: the art therapist's clients lead her to self-reflect on the holey vagina

As therapist of the LGBTQI art therapy group I run, it was my clients who led me to a new level of awareness regarding the split between my conscious desire to perceive the vagina as physical matter and the phallocentric discourse that prevailed in my unconscious.

Background: I founded the group in collaboration with the LGBTQI centre in Bologna while finishing my training. Now in its 5th year, its users have mostly been white, aged between 20 and 50 and have ranged from university students to office-workers, fashion-designers, wine-sellers, psychologists, musicians and bar attendants. Most of the users were not born in Bologna but moved here from other areas of Italy or abroad.

The setting: the sessions were regularly held in my private studio. All the participants in this specific group were white, biologically female and identified in varying ways under the umbrella LGBTQI. The group explored how the use of this term is helpful in being all-inclusive but also detrimental in fostering invisibility of specific identities within it: for example, a trans identity has many distinct aspects from a lesbian or gay one. The theme of today's session, the representation of the vulva, had been specifically requested by one participant and the group had expressed its consent. In today's session, I worked alongside my clients specifically to equalise power relationships concerning such an intimate topic.

The group's artwork: the prevalent response was that the subject demanded a 3-dimensional approach. "It's so physical, pulsating and tangible, it wouldn't feel right as a drawing. It would be reduced – as if it didn't exist" was the explanation given and the majority nodded in agreement. These 3-D works took the form of soft, palpable pouches and origami envelopes with secret pockets: artworks to be touched,

explored and unfolded, containing hidden secrets and messages. Their response confirmed a perception of an organ that was solid and manipulable i.e. physically present and not empty space. The group expressed consensus that representations of the vagina as a bi-dimensional image stripped it of its tangibility and risked reducing it to an object of the (male) gaze.

The therapist's self-reflection: only myself and another non-Italian in the group represented the vulva as a 2D image. There could well be complex socio-cultural dynamics working together with the group's dynamics. What I would like to focus on is the fact that the group's majority provided an alternative narrative. Outside of the setting, I began to interrogate my perception of the vagina: the stereotypical colours, qualities and art materials I associated with it. I used the group's narrative to question the dominant narrative I had absorbed as a child. Notwithstanding my feminist studies, I realised that my unconscious representation of the vagina *was* that of a hole. I realised too that it was in my power to change that representation.

The Oxford English Dictionary defines a hole as a 'hollow space' or a 'cavity', offering negative connotations of 'depreciation', 'a flaw' and even a 'prison cell' (Hole, 2019). However, if the vaginal canal *were* a hollow cavity, it would not be able to fulfil its biological function of allowing intercourse while also protecting the uterus as a sterile environment, essential for women's health. In comparison, the mouth (which is universal to both sexes) *is* a hole. I may close my lips but a hollow space remains inside. I can explore it with my tongue, feel the upper and lower walls of my jaw. There is an *empty* cavity, maintained by cartilage and bone.

The vaginal canal on the other hand is made to be flexible. It is made to remain closed around anything inserted within it. The only physical substance I can think of that has this property is *liquid*. I may insert a pencil into a glass of water, but I do not make a hole. And when I remove the pencil, no hole is left behind. The vaginal canal's extraordinarily flexible muscular walls can expand enough to allow a baby's head to pass through, but also return closed and touch themselves after birth. It seems to me to equate to one of the many qualities of the alchemical vessel as defined by Jung (1980), 'the vas is the water or *aqua permanens*' precisely because the shape of the vessel must conform to the process (p. 238).

Case study 2: the vagina as aqua permanens helps me connect with my client

I would like to apply this new vision of the vagina, not as a hole but as *aqua permanens*, to a specific artwork made by a gay client earlier on in a different LGBTQI art therapy group [Fig. 1]. It is an artwork that at the time I had difficulty relating to, a difficulty that I attributed to my fear of male power and the divergence of lesbian and gay perspectives. Today, I attribute it to the dominant narrative of patriarchal symbology I had introjected that included a stereotyped vision of male homosexuality. He's a man. He's gay. He presents with an image of a long, white pointed object emerging from a naked pelvis - what else could that be but a phallus?! The colours were cold: blue and white. Where could I have seen a vagina? There was no red, no warmth, no cavities. No holes (apart from a large slit in the right arm). No clay, no earth, no wetness, no paint. There was a man (or an angel) emerging from a lake. I now see the vagina as *aqua permanens* in this image.

The background: Luca was white, in his mid-forties, a musician and lectured in social psychology. He was 'out' with his family and friends and was an active member of the LGBTQI community. He grew up in the South of Italy and had responded to his home-town's homophobia by exaggerating his visibility and wearing a lime-green suit around town. It was a painful memory he explored later in the group by means of a lime-green butterfly-print [Fig. 2]. He was one of two men in a group of 8 participants and the group had been meeting once a fortnight for 3-hr sessions for about two months.

The setting: this particular session was in my studio instead of at



Fig. 1. Collage, feathers, pipe-cleaners, crêpe paper on blue card. (For interpretation of the references to colour in this figure legend, the reader is referred to the web version of this article).

the LGBTQI centre where the group normally met. Consequently, space was more limited than usual and for logistical reasons I had arranged the material in the centre of the room and we were seated around it. Luca tended to distance himself from the group during the creative process, a privacy he couldn't exploit today.

The warm-up: I began with a physical warm-up as I normally did. I proposed a symbolic shower as 'washing away the week's cobwebs' (feminine-oriented language already slipping into a space that was more confined then normal). Each participant nominated a part of the body that was massaged as we washed it metaphorically. Luca proposed the lungs and we concentrated on massaging the chest internally through our breathing: expansion and contraction that could also be said to mirror the contractions of the vaginal walls. Our chest is an important site of self-esteem, the source of our life-energy. It can be linked to birth as its specific function is activated the moment the baby leaves the mother's body and takes its first breath. Our lungs contain an important bodily sense of our being alive and being whole; most practices of meditation rely heavily on the patterns of our breathing. It is another example of an organ whose life-giving properties rest on its ability to actively adapt itself to its contents.

The theme: I asked each participant to choose an image from a magazine that represented someone or something they would like to have a conversation with that day. They were requested to cut the image out, choose a ground for it and attach it. There was feedback in pairs before they were given the further task of creating a visual dialogue with their chosen image.

Luca chose the torso of a naked man. He chose an A1 sheet of ultramarine blue paper, which he covered with a torn piece of celesteblue crêpe paper. The figure was placed in the centre. There is a slit in the right arm that was created due to the image coming from a doublepage spread. His pictorial dialogue with the image consisted in the creation of white extensions on the man's body in the form of a



Fig. 2. Assemblage of the year's art-works in a final installation.

mermaid tail, angel wings and a halo/head-dress using crêpe paper, feathers and pipe-cleaners.

I read the image as castrated idealisation: the more he sought to render the man angelic, the more I perceived it as demonic and debilitated. He had removed its humanity: it could fly (wings), it could swim (mermaid's tail), but it couldn't walk. My feedback was useful to him: the exploration of how idealisation always brings with it the other extreme; that perhaps even an angel can sin; that perhaps the search itself for perfection becomes a form of castration. However, I felt I hadn't truly got his message. Something hadn't connected with me. And in this sense, I felt I'd failed him.

This was rectified nine months later at the end-of-group individual interview. Luca's concluding piece had been to create an enormous collage in which he had attached all of the pieces he had made during the year [Fig. 2]. The importance of this guardian angel became immediately obvious thanks to its dominating position. It looks down over the central column made up of the lime-green butterfly-print bordered by black (his response to social homophobia referred to earlier) and beneath this a horizontal all-white collage of layered white crêpe paper. Together we identified the angel's role in the story narrated by these three artworks. He confided in me that he had done something that he could never forgive himself for, something he felt had caused him to lose the partner he had loved most. It was an eternal stone he was forever carrying around. He saw the white collage as the state of innocence he had lost. The middle piece was the pain of social

homophobia that had faded in time: it represented the possibility that the present pain could fade too. The guardian angel was his hope of redemption. It was his promise of a resurrection. And it was *this* that I had not seen. The possibility of reading the image as a man being born.

If I recognise the physical qualities of the vaginal canal's ability to embrace its contents as a liquid does, as *aqua permanens*, this reading of the image becomes clear. The white tail is no longer a phallus. It represents the space defined by the surface of the water from which the man emerges. It enwraps and protects; it does not castrate. The contrary: out of this white vagina, a man emerges like a butterfly out of a cocoon. The energetic movement in this picture is *up*wards and *out*wards. The man begins to spread his wings and smiles confidently, for he feels powerful and potent in his new life. He feels *good* about himself. He does not feel guilt. It is the catholic re-birth without original sin.

The slit in the right arm: here, in this slit, is the castration: the wound. The right arm may be seen as a symbol for our actions in the world. *Here*, is the fragmentation that needs to be integrated and healed if this man is to emerge whole, finish pulling out his legs and walk again.

By reading the white pointed tail as a phallus, I had seen only the movement *down*wards, only a struggle between impotence, castration and omnipotent phantasies. I had missed the other side of the story, where the *constructive* reading of the image lay for him at that moment. In Luca's own words: "*The piece was born from a sense of guilt linked to an introjected myth of perfection. I am an idealist and tend to push this concept*

to the extreme. Ironically, perfection then becomes monstrous because of its impossibility. Everything becomes heavy and fixed like a boulder, just like the obligatory notion of masculinity imposed by social conventions. I added the feathers on my head to make fun of the rules imposed and lighten the burden. When guilt becomes atrocious and threatens to kill you, the cocoon/ vagina offers the promise of a rebirth in its essential, white innocence that tends towards the spiritual beyond the sex of the flesh. The emphasis is on metamorphosis: the illusion that re-birth brings of wiping you clean of the past. A kind of redemption through death. The monster is asexual with wings like an angel and intangible. But just when we contemplate the birth of this beautiful, perfect being, we are faced with a monstrosity because this beautiful angel seems ready to devour us.

"The piece does not speak to me now because thanks to the work I did in the art therapy groups, I'm moving ever closer towards accepting my imperfection. But I often look back at the artworks I made because they were the means by which so many things came to the surface, things that seemed to be insuperable, and yet they've just melted away. From you, I always had the feeling of being understood, of your understanding what I couldn't find words for. I had the impression of a thread of connection on a deep level."

The dominant narrative of the active-passive binary of penetrative sex

Before arriving at the third case study, I would like to connect dominant narratives of the vaginal canal as a passive hole with the dominant narrative of active-passive power dynamics within sexual intercourse. In my subjective experience, the aggressive nature of this narrative obstructs love and intimacy.

The vaginal canal's active role during penetration is confirmed by its behaviour as a vessel made of *aqua permanens* discussed above: its ability to change shape and size, to expand to allow insertion, to close around the object once inserted and to provide lubrication to allow movement without friction. This active capacity to maintain contact with the surface of whatever it holds reminds me symbolically of the active binding force Bick (1968, 1986) calls upon when working with clients who have never developed a cohesive skin-ego and rely on a second-skin or adhesive identification to prevent disintegration.

The vaginal canal provides a safe place precisely because it responds and adapts to its contents and as such it seems to me to embody a key quality of Winnicott's holding environment: the mother's capacity for empathy with her infant and her ability to adapt to his/her needs (Winnicott, 1960). This symbolic connection of the vaginal canal to the role of holding is significant since it implicitly introduces an emotional and psychological level of interaction as inextricable from the physical act of sexual penetration. In contrast, its perception as a passive hole upholds the social and linguistic isolation of affection found in the act described as 'having', 'fucking' or 'screwing' that implies possessing, deceiving, damaging or making a mistake, as in 'screw over/up' or 'fuck over/up'.

The Oxford English Dictionary traces the first meaning (Latin: 200 CE; French 1374) of the word 'penetration' as being 'to pierce' (Penetration, 2019). Its first specific usage in English (1425) refers to the creation of a bodily wound. Only later is its meaning extended to sexual intercourse (1605). Since then, aggressive connotations have been re-enforced by its military usage to describe the projectile force of a gun's bullet (1807) and the infiltration of a country to gain power or information (1903). Our contemporary definition and archetypal image of sexual penetration would therefore seem to describe *not* a mutually consensual act of intimacy but rape.

However, the female body if unviolated returns to its unity and integrity post-coitus as water returns to its original calm, unruptured surface. By proposing that the result of penetration is the *creation of a wound*, I am furthering the notion that the female body is violated by sexual intercourse. This is indeed the dominant narrative behind 'losing' one's virginity. The woman does not gain experience or knowledge, but *gives up* important qualities such as social prestige, purity etc. to the

male subject who possesses her. This 'holey vagina' holds none of the active qualities of a safe, holding environment but becomes a passive void to be filled (ejaculation) and drained (the extent of female loss is proportionate to the male virility gained: deflowering a virgin holds special status). If these ideas seem outdated, we have yet to acquire a contemporary linguistic inversion of 'losing virginity'.

Persistence within the collective unconscious of the passivity of the woman's role finds confirmation in the tendency for women to fake orgasms. The woman's need to fake orgasm confirms the power dynamic by which the dominated's pleasure is not valued in its own right (above all, by the dominated herself) but obtains value in its confirmation of the dominator's ability to bestow it. What is important (and the woman who fakes an orgasm symbolically recognises this) is not that she orgasms but that she upholds the idea that the man can make her orgasm (MacKinnon, 1987, p. 58). Research such as that gathered by Hite (1981) and Hayfield and Clarke (2012) demonstrate the wide-spread diffusion of this symbolic violence.

An alternative narrative of penetration

I wish to offer an alternative narrative of penetration that no longer revolves around the power dynamic of dominator/dominated. To do so, I will use the metaphor of host and guest. I wish to see if alternative power dynamics may emerge when we recognise the body as personal territory/space. Patriarchal power always rests on a have/have-not dichotomy: king/subject; employer/employee; teacher/student; man/ woman; white/black. The power of the first is created by the subjugation of the second. Hence, empowering the second is damaging to the first. However, true empowerment moves outside this dynamic. When I have faith in myself, my power empowers the other. Hoagland (1988) defines this power as 'power-from-within'.

I propose to explicate the guest/host dynamics by using the metaphor of houses, the house being symbolically representative of an individual's intimate space. When I invite you into my house, I expose myself and hence become potentially vulnerable to your judgement: of my tastes, my cleanliness, my life-style, my economic status etc. Therefore, it presupposes a level of trust and marks a level of acquaintance, as when I invite a work colleague to dinner. By allowing you into my private space, I allow you to see new aspects of myself. I may pay special attention to cleaning my house before your visit: both as a sign of respect and to avoid negative judgement. Similarly, we might prepare our body for sexual intercourse: washing, shaving, perfuming etc. The level of preparation may reflect the level of intimacy of our relationship in both cases. The better we are acquainted, the less care I may take, as I expect to be accepted for who I am.

However, as the guest, I am also vulnerable. I enter another person's space and to a certain extent must abide by their rules. I must respect my host's routine, timing and choice of food. A smoker in a non-smoker's house may have to refrain from smoking. Vice versa, and the non-smoker may tolerate the smell in silence.

In synthesis, the host feels vulnerable because their intimate space has been exposed and they fear they may be judged. The guest feels vulnerable because they must compromise their needs to meet the requirements of their host's space. According to biological anatomy, the woman becomes the host during penetration as she physically receives the man's penis into her space. The man becomes the guest inside another person's body-space. And yet within the dominant narrative, concepts of exposure and judgement seem akin to the man: anxiety that a woman might find his penis too small, too hairy or too wrinkly? Similarly, the notion of compromising personal needs to meet the other's requirement seems more akin to the female role within patriarchal discourse. The phenomenon of faking orgasms explicates this compromise that belongs to the role of guest not host. So the roles taken on during penetrative intercourse appear to be the exact opposite to those pre-conceived 'naturally' by biological anatomy. It is not biology then that confirms the active-passive dynamic of penetration but the

power dynamics of the patriarchal symbolic: the woman is always a guest in a man's space, regardless of whether she's hosting him or not. The man is inevitably the 'master of the house'.

An act based on establishing power over the other by definition excludes the notion of equality and hence love. It excludes Lorde's (2007a) proposal of using the erotic as a source of power within ourselves. In 'All About Love', hooks (2001) identifies a series of requisites to be able to truly love. These include clarity and honesty in our communications, trust in a world that is just and a sense of a community that goes beyond the couple and the family. A common denominator throughout is the ability to trust both our partner and the world in which we live to such an extent that we are able to relinquish our need for control because we feel safe and are no longer afraid. So long as we distrust society because we perceive ourselves as vulnerable to abuses of power as dominated subjects, or vulnerable to losing our power as dominators, we will continue to protect ourselves by unconscious methods of control that impede a truly shared, mutually-loving, respecting and intimate relationship.

Case study 3: transforming the narrative of active/passive penetration blocking a client's access to sexual intimacy

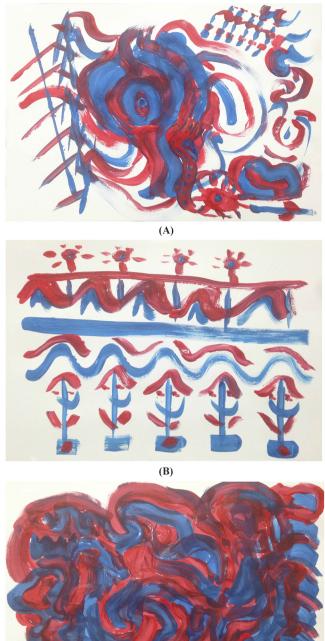
Background: Greta was a white, lesbian client in her late 20 s who had moved to Bologna to study and now worked as a graphic designer. She sought individual therapy with the specific request to resolve an internal conflict between 'her internalised male and female parts' (her language). About three months into therapy, she asked to explore her fear of sexual intercourse because she was beginning a new relationship and knew sex would soon be expected of her but she felt vulnerable and did not trust herself to be able to open up or perform appropriately. It was very difficult for Greta to let anyone into her personal space. One of the first images that had appeared in our sessions was that of a tortoise. She recognised herself in it and explained how she felt safe but frustrated within her body armour. She hadn't cried since her teens. In her world, there was no such thing as a non-judgemental gaze. I worked alongside her in our sessions as my gaze was difficult for her. She explained it made her feel naked and this experience was new and frightening. Now she was asking me to use this intimacy to help her allow another person into it.

I realised she needed to explore this as a physical experience if it were to help her. This was confirmed by her angry refusal of my first proposal to make a representation of sex: "I'll just get embarrassed. I'm embarrassed enough already having to ask you." "OK," I replied. "Then instead of representing it, let's do it. We can have sex with paint." She agreed eagerly. I think the acceptability of my proposal lay in the fact that it presumed an equal vulnerability. If she resented feeling naked before my gaze, it seemed that now I would have to metaphorically take my clothes off too. I was confident that the process of painting together was a safe way of contacting the emotional responses and psychological dynamics she put into play when entering another's personal space while being distanced enough to keep her defence mechanisms from blocking the experience. The process could invoke the affects of sexual intimacy and the dynamics would be made accessible to her through symbolic equation. A testimony of our intercourse would remain in the artwork produced, which could carry symbolic meaning she could access once she distanced herself from the creative process and returned to functioning in the narrative symbolic mode. She could then understand the dynamics intellectually and live a corrective experience.

Greta chose A3 white paper and two different coloured paints: red for herself and blue for me. We both had a medium-sized brush for applying the paint [Fig. 3].

1st painting (A): Exposing the narrative of active-passive penetration

i) The Process: she made a mark and I responded, creating a pictorial



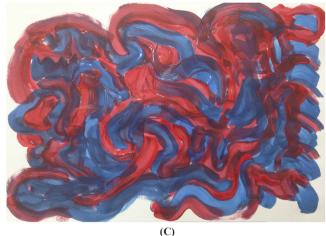


Fig. 3. (A) Exposing the narrative of active-passive penetration. (B) The activepassive power dynamic is annulled. (C) Trust allows sexual intimacy and fusion.

conversation. I noticed images emerging: a vulva (central), a spider (bottom right), a pair of lips (bottom right), a scar (left). I enjoyed the process and became a little aroused, believing she was too since periodically I saw her smile. She suddenly stopped and I realised her anxiety. She said in a confessional way that she was feeling troubled. She felt she was doing what she thought I wanted her to do and this made her feel trapped and angry. The finished painting created anxiety when she looked at it.

ii) Analysis: the image represents a power struggle and incorporates

the passive/active dynamics of penetration discussed earlier. It is a fragmented image that lacks a centre. It could indeed be the representation of a rape: a central vagina is prised open, exposed and fraying at the edges. Red and blue lines flare out like loose threads from torn fabric. On its left are lines that are not integrated. Are they cuts? Or rain? They have in turn been crossed by other lines, creating a scar, or a grid. An attempt to cage? On the right, there is a wave of marks, lines and curves. Attempts to dance? Momentarily they find a form: lips? An eye? A belt? But disintegrate again into flicks and splashes.

This is the result of an intimacy between two people where the one (Greta) does exactly what they think the other wants, negating their own desires and performing to gratify the other. The other (myself), unaware that the first is 'faking their orgasm', carries blithely on absorbed in their own pleasure that they believe is shared, thus unwittingly violating the first. This situation has been created because trust is lacking and this leads to a passive-aggressive dynamic. We can see that Greta perceived me as a potential source of harm rather than pleasure. Her instinctive reaction was not to encourage intimacy but to create distance. Yet, conflictingly, she also desires this intimacy and wishes she could trust me. Therefore, she tries to play along but the feeling of acting-against-her-will predominates, and it is clear that one cannot feel pleasure in such a situation. Sensations of anger and entrapment will increase until they become unbearable, unless kept at bay by defence mechanisms such as dissociation or isolation of affect.

However, there is a paradox. We know that Greta *did* trust me. This trust is shown on many levels: in bringing the topic to be explored, in verbalising her anger (and not acting out) and in agreeing to continue with the exploration in a second piece. It seems appropriate to say that it was not the *person* but the *act* that Greta did not trust. Our painting brought out her distrust of sexual intimacy itself, regardless of the person (or the gender of the person) she was with. The dynamics created here had little to do with the biological reality of penetration and everything to do with the psychological states that have been created by the introjection of social values and power dynamics that have extended from sexual intercourse itself to the way in which people experience sexual intimacy per se.

2nd Painting (B): The active-passive power dynamic is annulled

- i) The Process: I stipulated the rule that she should do exactly what made her feel at ease, regardless of her phantasies of how I felt about it. She was doubtful but agreed when I proposed it as a game. She made a mark and I responded pictorially. She soon stopped again and complained that we were not going anywhere. She felt that this time she was being deliberately antagonistic and moving away from me instead of towards me. If before she was all complicity, now she was all opposition. I reassured her that this was OK and that she should do whatever made her feel safe. We continued and the rest of the painting proceeded without anxiety. She was pleased with the result and said the finished painting made her feel happy.
- ii) Analysis: the image represents a resolution in terms of power. It is harmonious and balanced with no signs of a struggle. It has been created by rules of organisation that both parties have adhered to and not challenged. This was made possible by Greta's honesty about her feelings that led to our verbal negotiations. In fact, the mind is dominant here and we can see how the piece has been rationally organised, like a pattern or a diagram. The result is a constructive exchange but it shows none of the intimate fusion of sexual intimacy. However, each individual has respected the other's marks and neither has pressed for power over the other. It is this mutual respect (the annihilation of the passive/active dynamic) that created

the necessary trust in intimacy itself that allowed the next painting to be made and fusion to be achieved.

3rd Painting (C): Trust allows sexual intimacy and fusion

i) The Process: I divided the paper symbolically in half to represent our separate body-space. She had the left half and I the right. Instead of being a conversation (statement/response), this piece became a negotiation in which we each had to evaluate when and how the other person might appreciate us entering their space. She began on her side of the paper with many red dots that she joined into a curvy line. I began with many small blue lines on my far right. I wished to be unthreatening and allow her to be the first to seek contact when she was ready. Her curves and dots increased in number until they filled her half of the space. She suddenly made a large sweeping curve and invaded my space by overlapping one of my lines. Without taking her brush off the paper, she continued the curve back into her space. It created a wall between us, while clipping my curve. I felt violated: invaded but then shut out. She immediately realised what she had done and verbalised it as aggressive. She said she had thought a lot about her behaviour (since being in therapy) and saw how this matched up: she didn't know how to approach someone delicately. She was so afraid of being hurt that any request for intimacy became aggressive.

This was a key therapeutic moment. On the one hand, my feeling of violation was real and allowed me to better understand the dynamics of her interpersonal relations. On the other, I recognised it as the affect her behaviour unconsciously sought to produce: her own sense of violation had been split off and projected into me. Had I allowed this feeling to become mine and to have acted upon it, I would have moved out of my role of therapist and become part of a commonplace enactment of her object relations. In order to offer her a possible alternative experience to be lived, I transformed this sense of violation into a sense of desire and replied, "Let's imagine that you just brushed my arm. Perhaps I wished that you'd brushed both of them." She responded positively and began to follow her lines all over my space. In response, I entered her space too, and suddenly we were both painting together and there was no longer any turntaking. It became a dance in the paint that covered the previous marks and lines. We finished when there were no longer any white spaces to fill. She was excited and satisfied.

However, as she moved away from the painting, her anxiety returned. As she regained her distance from the experience and changed from participant to witness, her mind realised what she had risked. She could not understand rationally how she could have lost herself in another, without being lost. She attacked the work we'd done by asking how this could actually help her in real life. I explained that she had lived a process. She had experienced sensations and she had lived a situation of fusion that hadn't created anxiety. Her mind might be troubled but her body would remember the experience.

ii) Analysis: this third painting embodies the level of trust in the other that allows power to be relinquished and opens the door to mutual intimacy and fusion, as defined both by hooks (2001) and Bourdieu (2001). Only when I have complete trust in the other (I trust them not to exploit that trust to exert power over me) can I abandon myself in their hands and only when I have complete trust in myself (not to exploit the other's trust and exert power over them) can I embrace their abandonment in my hands lovingly. The paper is entirely covered by swirling waves of red and blue while neither colour loses its identity to the other. The painting portrays a union that has taken place with mutual respect: neither has sought power over the other. The space became ours at our mutual agreement.

This session became the first of a series of sessions in which Greta worked on her sexual identity, embodiment and sexual intimacy. She was able to come out to her parents a few months later and experience how this process in itself changed the way in which she lived her lesbian identity and gave her more serious expectations of her lesbian relationship.

I chose this case study because it illustrates the universal nature of dominant narratives: power dynamics presumed to be created by the biological nature of heterosexual penetrative sex extend into lesbian relationships precisely because the dominant narrative is not created by biology but by the social values in which the individual is steeped. Social power dynamics are introjected and become the basis of our daily relationships, escalating through projective identifications, until positive therapeutic experiences provide alternative patterns of relating.

Conclusion

Every therapist inevitably holds in their mind an idea of right or wrong, of better and worse choices: some kind of vision of how their client can help themselves resolve their problems (Totton, 2006, pp. xiv-xv). Such a vision is often essential to the therapeutic process. But its helpfulness also depends upon the therapist's awareness that it nevertheless exists as a constructed, subjective imposition - not as an absolute, objective truth. In the latter case, it forecloses meanings and alternatives. When Greta later asked if we could work on the theme of coming out, she was hesitant because she wished to address the issue but didn't feel ready to come out to her parents. She was afraid that by working on the theme in therapy she would either be coerced into doing so or feel like a failure if she didn't. What she brought to me was the social judgement that 'coming out' was a fundamental goal to be achieved and as such it was unequivocally superior to 'not coming out'. I said to her that exploring coming out meant exactly that. Exploring. We couldn't do that if she already had pre-determined values about it.

If I, as a therapist, remain in a space where the vaginal canal can only be seen as a red, warm hole and penetration as a sword-in-sheath active-passive binary then I am limiting the therapeutic space and impeding my client from exploring any paths that venture beyond. I chose these two specific aspects to explore as being my personal field of interest and experience but I offer them as examples of a phenomenon that as Hadley (2013) states needs to be explored 360° through every '-ism'.

It is essential that Art Therapy Courses include this kind of training, not as an extra, a token-ism, but at their core. Only in doing so are they recognising that the issues covered form the fundament to our practice: lending our mental space as a blank sheet of paper, free of preconceived ideas and social judgements. We need to remember that dominant narratives are *always* operational, and to a greater extent precisely where no minority group is present to call attention to them. LGBTQI training is *not* just about working with LGBTQI clients: it is about learning to question our own values and vision of the world by questioning the dominant narratives that shaped us; it is about recognising difference and subjectivity so that I can use that difference as a tool instead of being blinded by it. In Case Study 2, my self-reflection was important as a therapeutic process. It opened up a space in my mind that I feel helped me connect at a deeper level with qualities that my client was expressing from a different subjective standpoint to my own.

I hope that Case Study 3 adds a valuable contribution to Schaverien's (1995) and Ellis' (2007) research on the usefulness of art materials in art therapy for addressing sexuality and intimacy: the art object can hold the erotic transference, *be* the site of exploration and most importantly the language of art-making uses the same language as sexual intimacy (gesture, pressure, touch, movement) meaning that the initial essence in the communication is not lost in translation to a verbal level. Art-making allows sexual activity to be transcribed into a practical, transformative experience that may be lived safely within the

therapeutic setting.

I invite art therapists to self-reflect on our art materials. Do we associate some materials or colours with a specific gender, phallic or vulvic? Perhaps sometimes these associations can be useful, but if we don't call them into consciousness, they cannot be questioned if they threaten to block meaning. Does our selection of magazines for collage represent the whole social spectrum of our local community? Have we included LGBTQI material and other magazines published by minority groups? If we think that LGBTQI images are irrelevant to our heterosexual clients, have we considered how they might open up a space our clients might not otherwise have the courage to venture into? Is it productive to limit our inner world, phantasies and symbolic imagery according to sexual orientation and gender-assignment at birth?

Dismantling dominant narratives, as Hadley (2013) requests, requires above all self-reflection. As art therapists, we have many tools for this process: our response art to clients (both during and after sessions), our personal therapy, our personal art-making and our own writings and literature. Talwar (2010) calls for our countertransference to be examined within a sociocultural intersectional framework and not limited to its traditional view as an unresolved intrapsychic conflict (p.16); Hocoy (2005) invites us to explore our own shadow material, 'cultivate a perpetual awareness of the interconnectivity of life' and take an active stance outside of the art therapy studio in redressing social injustice (p. 14). I believe I am not alone in viewing art therapy, in all its eclecticism, in its historical development and its borderline medical position, as an alternative narrative per se that over the years has challenged many dominant narratives of power within the health profession (Henzell, 2002; Robbins, 1987; Waller, 1991; Wood, 2002). 'Art therapy [...] is distinctive in its emphasis on the patient as an active searching agent: no longer a passive being through whom practitioners simply represent their clinical systems, but a unique individual capable of self-healing and [...] self-determination,' (Littlewood, 1991). When we write our own stories and self-reflect on our prejudices and shortcomings, we make ourselves vulnerable, just as our clients do. But we also activate a self-healing process, just as our clients do. Vulnerability transforms itself into empowerment, as performance artists Schneemann (1975) and Sprinkle (1990) have demonstrated. As art therapists, we testify daily to the creative process: whenever we take something apart, space is created for something new. Our mental space is as important as our art materials. It is our job to make sure our mind is as clean and ready for use as the art materials on our shelves, and our task is never finished because as Hadley (2013) reminds us dominant narratives rebuild themselves just as dust recollects after cleaning.

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Case studies 2 & 3 were personally read by each client and their content discussed vis-a-vis. Pseudonyms have been used.

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Permission

I have written, signed consent from each of the clients mentioned in this article to use their case studies and reproduce the images.

Declaration of Competing Interest

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