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## Art in Occupational Therapy: An Introduction to Occupation and the Artist

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Occupational therapy (OT) has been described as "the art and science of helping people do the day-to-day activities that are important and meaningful to their health and well being through engagement in valued occupations" (Crepeau, Cohn, & Schell, 2009, p. 217). This definition highlights the synthesis of both the art of practice and the science-based evidence of practice in the OT profession. Additionally, this definition underscores the importance of occupation in the practice of OT. The conceptualization of art as embedded in the definition of OT practice is rooted in the history and development of the profession (Levine, 1987). The "Occupation and the Artist" section of the Open Journal of Occupational Therapy (OJOT) will highlight the use of art in the practice of OT and in the occupations of both consumers of OT services and its practitioners. The cover of each issue of OJOT will feature an art creation accompanied by an exploration of the artist's life or practice experience and the occupational foundations of art in each artist's life.

The profession of OT blossomed out of the Reform Movements of the late 19<sup>th</sup> and early 20<sup>th</sup> century, specifically the Arts and Crafts and Moral Treatment Movements (Schwartz, 2009; Levine, 1987). Prior to that time, society often isolated people with chronic mental illness and physical disabilities. The health profession prescribed "bed rest" and, at times, subjected patients to harmful treatments and poor living conditions (Hussey, Sabonis-Chafee, & O'Brien, 2007; Levine, 1987; Schwartz, 2009). Benjamin Rush was one of the first physicians to incorporate the principles of Moral Treatment into the care of the chronically ill in the United States during the 1800's. His principles included the philosophy that all people are entitled to consideration and compassion, and that participation in purposeful activity improves health (Hussy et al., 2007).

The Arts and Crafts Movement's basic principles included value for authentic experiences, natural processes of construction, and quality of life (Hussey et al., 2007).

Building on these principles, Dr. William Rush Dunton, along with other physicians including Adolf Meyer, pioneered a paradigm shift for the treatment of people with chronic conditions, recognizing the interconnectedness of purposeful activities, participation, and health (Hussy et al., 2007; Levine, 1987). Social activists Julia Lathrop, Rabbi Emil Hirsch, and Mary Potter Brooks Meyer began systematically to apply the arts and crafts movement principles in their work with the chronically ill (Levine, 1987). This treatment included the production of arts and crafts products, focusing on the "curative" aspects of the art experience, as well as occupational participation through the sale of the products (Levine, 1987). In 1910, Susan E. Tracy, a nurse, developed the first textbook that described the use of "occupations" in recovery, which focused primarily on arts and crafts participation (Hussey et al., 2007; Tracy, 1910; Levine, 1987). Eleanor Clarke Slagle learned about using curative occupations while training as a social worker in the early 1900's (Hussey et al., 2007; Schwartz, 2009). Soon, medicine and art were combined to establish sheltered workshops for people recovering from illness and for those with chronic illnesses (Hussey et al., 2007). While sheltered workshops were not sustainable, the foundations that linked purposeful activities, such as arts and crafts, and successful outcomes for chronically ill patients were established along with the OT profession (Hussey, et al., 2007; Schwartz, 2009).

As the profession of OT grew, practitioners' views of the use and meaning of arts and crafts in therapy expanded and diverged. Some OT practitioners remained tied to the early principles of the Arts and Crafts Movement, which included a focus on the quality of the product produced and the use of arts and crafts activities as purely diversion tasks (Hussy et al., 2007; Perrin, 2001). Other practitioners focused on the curative aspects of the process of doing arts and crafts (Hussy et al., 2007; Perrin, 2001). Throughout the 1930's and 1940's intra-

professional conflicts divided OT practitioners, but ultimately drove the profession toward a model of practice that incorporated a mixture of the founding principles of the profession, yet embraced the medical model of practice, thus creating the unique blend of "art and science" in OT (Hussey et al., 2007). Divisiveness around the use of arts and crafts continued throughout the profession's history and continues even today (Perrin, 2001). Beginning in the 1970's practitioners sought to increase their knowledge and interventions in the areas of kinesiology, neurology, and psychodynamic approaches, and decreased the use of arts and crafts modalities in treatment (Perrin, 2001). Arts and crafts activity interventions were categorized as purely leisure pursuits (Tubbs & Drake, 2007). The recent re-focusing on the role of occupations as core to the practice of OT, along with society's increased participation in arts and crafts activities, has encouraged the incorporation of arts and crafts back into the practice setting (Perrin, 2001; Tubbs & Drake, 2007).

An example of the application of the founding principles of OT with an emphasis on the use of art as a treatment modality is noted in the story of Dymtro, a Ukranian immigrant who was institutionalized from 1953 through 1977 at the Willard State Hospital (later re-named Willard Psychiatric Center) (The Community Consortium, 2006). According to the Willard Suitcase Exhibit Online, after several years in which he "languished" while living at Willard, Dymtro began attending OT groups that provided him with the tools to communicate through painting and art. He began completing a painting a day, incorporating this into his daily routine. Exhibits displayed his detailed works, and after leaving Willard he continued to paint (The Community Consortium, 2006). This example displays how OT practitioners incorporated artbased activities into treatment, resulting in increased self-expression, the development of skills for occupational participation, and the establishment of daily routines.

Historically, training and education for OT practitioners has included learning crafts and creative occupations for use as therapeutic interventions. Early coursework in OT included training in specific craft mediums such as needlework, weaving, leatherwork, and book binding (Levine, 1987). The first set of educational standards for training occupational therapists, adopted in 1923, included craft training (Hussey et al., 2007). This continued for students until the 1960's when the profession shifted toward the medical model and specialization in practice (Hussey et al., 2007). Although some OT schools continue to have courses that incorporate learning arts and crafts, it is no longer a required standard of OT curriculum to offer such training (American Occupational Therapy Association, 2011). Some speculate that the use of arts and crafts has declined due to the stigma of using "low tech" interventions in a high tech world, and because of the unrecognized value of crafts as a modality (Harris, 2008). This can also be noted in the accreditation standards. While no standards exist for demonstrating an understanding of arts and crafts procedures, there are standards that require an understanding of technology (American Occupational Therapy Association, 2011).

Despite the shift away from using arts and crafts, OT has maintained its identity as a profession that utilizes creativity in practice. This creative identity can be linked to our roots in the Arts and Crafts Movement because creativity is an essential part of the process of arts and crafts making (Peloquin, 1996). Although our unique creative identity can be traced to our arts and crafts roots, the creative essence of our profession has expanded beyond simply arts and crafts activities. Schmid (2004) found that occupational therapists understood creativity in their practice to include adaptation, innovation, change, first insight, going with the flow, and risk taking. This exploratory study also found that practitioners identified creativity as "part of everyday practice" (p. 83) and that the use of arts and crafts activities in treatment encouraged

the patient to think creatively (Schmid, 2004). The nature of creative practice may be one aspect that attracts OT practitioners to the profession. In a study conducted by Craik, Gissane, Douthwaite, and Philp (2001), first-year OT students identified the "chance to use creativity" as one of the factors drawing them to pursue a career in OT. Cooperstein and Schwartz (1992) completed a similar study in which the "chance to use creativity" was endorsed as a factor that influenced the therapists' choice of a career in OT by 29.9% of the respondents. Both practitioners and students continue to recognize and seek out the creative roots of OT.

Modern practice continues to use arts and crafts-based activities, but there is an on-going discussion about the role of arts and crafts in practice. Formal use of arts and crafts activities has declined (Harris, 2008), but mental health, geriatric, and pediatric settings make regular use of arts and crafts (TeBeest, Kornstedt, Feldmann, & Harmasch, 2002). Perruzza and Kinsella (2010) completed a review of literature on the use of creative arts occupations. They found that practitioners identified the following themes as associated with outcomes from the use of creative arts: Enhancing perceived control, building a sense of self, expressing one's self, transforming the illness experience, gaining a sense of purpose, and building social support. Others have viewed the primary use of arts and crafts activities within the context of the consumer's occupational patterns (Perrin, 2001). Using the concept of occupation, practitioners are choosing individualized treatment tools, which may include an arts and crafts project, if meaningful to the patient (Tubbs & Drake, 2007).

Therapists may also use creative arts activities as a part of their own occupations. The OT profession can be stressful, as we work with people during some of the most difficult times in their lives. The same benefits that creative arts bring to our patients can apply to the therapist.

Many therapists enjoy participating in creative outlets, such as art making, as part of their occupational profile.

Each issue of OJOT will explore these themes of the use of art in practice and the practice of art. A featured artist will provide a piece of artwork for the cover of each journal. This section will explore the artist by telling his or her story in relation to the occupation of art creation. We will explore the artists' interaction with OT (as a recipient or a provider) and will identify the influence OT has had on the artists' engagement in art. The featured original artwork on the cover of each issue is an acknowledgement of the roots of our profession, a display of the value of occupations in individuals' lives, and an inspiration for creativity in personal and professional lives.

The artwork displayed on the inaugural issue of OJOT, titled "The Road Ahead," features a painting by Diane Dirette, PhD, OT, and Editor-in-Chief of OJOT. As a young girl, Dr. Dirette learned to paint from her neighbor and she has continued painting throughout her life. She engages in painting for the excitement of creation and as a reprieve from her many responsibilities. Dr. Dirette has incorporated art-based interventions with patients whose occupational profile includes the role of artist. The oil on canvas painting on this issue's cover provides us with the image of a shady path moving toward the horizon. The image mirrors the efforts of OJOT, leading us down a path to discovery. The trees lining the pathway remind us of the foundations of our profession and that the path does not end but continues on in ways yet unknown. As we journey together through the pages of OJOT we will examine applied research, practice and technology guidelines, and, in this section, an exploration of artists and occupations.

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