

**UNIVERSITY OF ART AND DESIGN
CLUJ-NAPOCA**

SUMMARY OF THE DOCTORAL THESIS

**ARTISC EDUCATION AND ART-THERAPY BY MEANS SPECIFIC
TO CERAMICS**

PhD Applicant Chirilă Emilia

Scientific coordinator

Ist grade Scientific Researcher Phd Livia Drăgoi

2011

The “major” types of visual arts – painting, sculpture, and graphics – have been used for a long time in creative education/art therapy, enjoying a large arsenal of theoretical comments. Meanwhile, there are very few works that explore, specifically and thoroughly, the field of ceramics in its relationships to education and art-therapy.

In foreign literature, there are references to the way in which ceramic bowls are used in primary reception, mainly in stimulating the gustatory and olfactory senses, along with other methods of stimulation using all the senses, sculptural modeling being mentioned as a stimulator for the visual and tactile senses (1). The possibility of using, in creative education/art therapy, the creation process of ceramic objects, omnipresent, familiar in daily life and environment, is not studied in depth. We set out to approach this topic from the perspective of our own experience, that of ceramic artist and art therapist, with the firm belief that the art therapist must be a professional of an art domain, which forms the base of his therapeutic techniques.

As ceramic artist, I am, above all, a creator of forms destined for an ambient (environment), while as industrial designer (whose creations are completed by qualitatively heterogeneous groups, that must be coordinated on multiple levels during the execution-production phases, in order to attain the final goal – that of successfully producing a ceramic object) I have often faced the issue of the collaborators’ abilities, for whose development I have turned to art pedagogy or the psychology of design, form, color and, not least, to work pedagogy. Sometimes, disabled persons (mentally limited, with chronic diseases, or persons in different recovery phases: alcoholics, depressed, schizophrenics, epileptics, etc) had to be integrated in various teams. Also, the ability to communicate with one’s superiors, subordinates or business partners is essential in the activity of a ceramic designer. The documentation process, in domains specific or related to design – shape grammar, psychology of shape and color, design psychology, history and theory of art and design, anthropology, philosophy, pedagogy, methodology of ceramics teaching, work psychology, marketing – has unfolded, by necessity, over the course of my entire career, the required material for my doctoral research topic, accumulated over time, being completed and updated mainly with knowledge pertaining to the fields of art therapy, psychiatry and psychology – general and applied.

I began the practice of art therapy in 1996, as a volunteer for The Centre for Mental Health of Children and Teenagers, part of the Emergency Hospital for Children, Cluj-Napoca (CSM).

The documentation, activities and case studies of clinical art therapy have unfolded within interdisciplinary teams comprising: a neuropsychiatry doctor, a psychologist, a pedagogue, a social worker, an art therapist and nurses – each one having a specialized role. I have to underline the fact that, in the first phase of the art therapy activity, it is desirable that the artist is part of an institutionalized framework, which acts as a guarantee for his professional qualities. In my case, these requirements have been met, as I am both a member of Romanian Artists Association and a graduate of the Cluj-Napoca University of Art and Design's Art Pedagogy module.

In 2004, following a new period of work as a volunteer, I have suggested a new research topic, that later became the topic of my doctoral thesis. Since 2007 I have been employed as art therapist at CSM Cluj-Napoca. In 2009 and 2010, I received two grants for occupational therapy from the Romanian Ministry of Health, which enabled me to organize a multimodal therapy workshop – art therapy, occupational therapy, ergo-therapy, game therapy, melotherapy – with methods specific to ceramics, and using the arts connected to it. During the research period in the development of my thesis, I studied at CSM 132 cases per year on average for three years, totaling 396 cases, the results of those studies being published, in my quality of art therapist, in the papers listed in my professional CV, presented in the Annex of this work. In view of the development of those studies, which were used in the elaboration of my Ph.D. thesis, I have selected the cases in which art therapy held a central role in the therapeutic process (since in some cases medication, psychotherapy or speech therapy prevailed).

My activity as an art therapist also took place in the Jucu orphanage, where I worked with severely disabled (heteroaggressive) and autistic adolescents, the case studies from the course of my activity being naturally integrated in my present work. Regarding the use of ceramics in general artistic education, targeting self-fulfillment and an improvement of the quality of life, in the development of my thesis I have capitalized on the knowledge acquired by direct contact with prestigious practitioners of this specific educational method (from the USA), but also on my own experience, namely my activity with children (pre-school, elementary and secondary school) which unfolded within the camp organized in the open-air section of the Ethnographic Museum of Transylvania "Romulus Vuia", and with university students (from various European countries) who attended my workshops that took place within an Erasmus program sponsored by the Babeş-Bolyai University.

In order to enter the dimensions of the proposed study, the definition of certain fundamental operating terms of reference was necessary, given the observation that in Romanian literature the terminological unification in the field of art therapy hasn't been accomplished yet. For example, a doctor will use the term of "patient", the psychologist that of "client", but we, as art therapist, have adopted the term of "beneficiary", because the art therapist discovers and uses remaining abilities which bring the beneficiary closer to normality. The term was accredited in our country only in 2009, at the 3rd International Conference dedicated to art programs for the benefit of disabled persons, organized in Poiana Brasov, under the title of "Together using Art, for Disabled Persons".

Even the field of art therapy itself does not have a complete theorization, art therapy being, as Judith Aron Rubin, president of the American Art Therapy Association, specifies "still a technique in search of theories" (2) adding that "even though the debate continues, almost all of us agree with Elinor Ulman on the fact that 'art therapy should be applicable to any attempt that is part, originally, both of art and of therapy.'" The author highlights here the two elements whose synthesis represents the essence of our activity: art + therapy, and reminds us that art by itself could be therapeutic and therapy alone can be artistic, art therapy being the product of a marriage between the two partners, in which neither of them loses its identity.

In many research and artistic education centers in Europe and the USA, the artistic education that also uses the therapeutic applications of art is called "adaptive art".

Throughout the Romanian literature, as Vasile Preda says (3), many terms are used synonymously: art therapy, art in therapy, ergotherapy, occupational therapy, creativity workshop, creative psychotherapy. We differentiate between some of these terms, depending on the objectives of the various types of creative, educational/art therapeutic activities that we have analyzed.

Regarding the phrase "artistic education", throughout this paper it has been used in the sense of developing the individual, authentic artistic talent, of acquiring certain habits, abilities, and individual techniques, with the purpose of training artists in various domains of the arts, as well as the acquisition of theoretical and practical knowledge from the fields of art theory, aesthetics, criticism and history, etc, adapted to the natural, innate capacities, in order to develop the creative nonverbal expression and plastic expressivity. Starting with this approach, we have extended this terminological meaning to the formation of abilities of expression and visual and

verbal communication, correlated with the development of psychological, emotional and cognitive abilities necessary in the practice of visual arts by persons outside artistic professions, of all types and ages, including persons with special needs.

Artistic education and art therapy have in common the fact that they are types of art applications that integrate theories and practices of art pedagogy in a support environment: museums, art galleries, outdoors, interior, ambient art, nature, classrooms or creative studios, in which artists make use of influences offered by the environments specific to the practice of art, which through their multi/inter/trans-disciplinary nature encourage the freedom of creation, thought, expression and the imagination.

Art in itself assumes the existence of a public whom it addresses (amateurs, promoters, experts, critics, buyers, etc.), a phase which integrates the created object into the socio-cultural reality. In this respect, we distinguish between “the creativity workshop”, which implies techniques, methods and procedural means that tend primarily towards an aesthetic finality, and the “therapeutic expression workshop”, that emphasizes another finality of art, which is tied to self-understanding, self-fulfillment and recovery; in this latter context, the art object is an emotional form of communication, that serves as a means of understanding, imparts meaning and clarifies the experiences that cannot be expressed through words.

We have considered of special significance the direct participation of the artist in creative education/art therapy, established as scientific research method, this acknowledgement being imposed by the specificity of the therapeutic practice. Referring to the artist’s direct involvement in the experimental process as research topic, and his relation to creative education and art therapy, Shaun McNiff considers that it is “an extension of his practice... it implies transfer and contra-transfer and other subtle nuances in a continuous process of change, derived from the experienced process... science recognizes the role of observation in research. It can be concluded, referring to the artist’s personal involvement in the experiment in creative art therapy research, as being necessary and conditioned by practice.” In the case of art therapy practice, the artist and the beneficiary do not question whether they are “good enough”; value judgments are removed, because what is important is the plenitude of spontaneous expression(5). It refers to an adaptive approach – all artists that practice art therapy rely on their artistic activity and have a common trait: they are in concordance with the “essential pragmatism”(6), as opposed to the therapies through artistic mediation, where the therapists are non-artists, but they use the

language of the visual arts in assessment and therapy. The therapeutic process in art therapy is based on the artist's creativity, which, together with that of the beneficiary, merge in a creative flux, adapted to the beneficiary's abilities and needs. The efficiency of the therapeutic act is influenced by the quality of the associative relationship, developed during the joint creation process, between therapist and beneficiary, during the art therapy sessions. In this process, the artist uses means taken from general art education in order to develop psychomotor skills, with a view to facilitate non-verbal expression, thus transforming crafts into therapeutic methods. In my case, I use pottery, design and execution techniques derived from handicraft and ceramic design, techniques of transposition into ceramic, graphics and painting as decoration techniques, but also as techniques for the decoration of the ambient, for relating to the natural and artificial environment, using the field of ceramics and its connected arts.

In my therapy practice I also use toy-objects or ceramic installations of my own, based on the different age categories of beneficiaries and their various abilities. For this purpose, I have established a collaboration with the English melo-therapist Kate Bexter, for whom I create ceramic objects that she uses in melo-therapy, and together with Alexia Quin (who has an important role in the development of Romanian art therapy, through the initiation, in Braşov, of a line of studies in melo-therapy), I experiment with other methods of collaboration. With the aid of ceramic toys I have combined art therapy with game therapy, melo-therapy, kineto-therapy or dance, thus enlarging considerably the domain of multimodal therapy, by introducing complex movement taken over from creative and execution processes characteristic to other arts attached to the field of ceramics.

As a component of visual arts, ceramics was used for the first time in a medical project of art therapy and occupational therapy that started in the 19th century and continued throughout the beginning of the 20th in the United States of America, at "Parblehead Pottery" ceramics manufacture in Massachusetts. Based on the philanthropic ideas of the "Arts and Crafts" movement, this project had an unusual start: it used the manufacturing process of ceramic products with a therapeutic purpose, in the treatment of neuropsychic diseases, especially that of depression. This project becomes an independent artistic one in 1905, when, led by the artistic director A. E. Baggs (8), its therapeutic purpose is firmly established: that of supporting the patients so they are able to acquire a sense of authority over the environment and over life, as a condition of achieving personal fulfillment, of improving the quality of their life, and, in some

cases, of socio-professional integration.

In a similar spirit functioned until 2005 a “Cooperative for disabled persons” in Cluj-Napoca, within Craft Cooperatives (ATCOM). Unfortunately, due to a lack of funding, this company was dissolved, only several workshops of this type being functional at present in various locations in our country. During the elaboration of this thesis reached us the gratifying information referring to the establishment in Cluj-Napoca of a center for occupational therapy for persons with special needs, where new techniques of image producing and processing are being used with the goal of a professional qualification that takes into account both the remaining abilities of the trainees and the current needs.

Thus we have reached another argument that made me opt for this topic: to attract attention to the necessity of creating a series of protected spaces, with a productive purpose, for socio-professional integration. I, myself, have noticed that for persons that need a protected social environment, individual or group art therapy has considerable effects in maintaining and improving the quality of life, the field of ceramics having also a particular role in the process of socio-professional integration.

In order to understand the reasons for this choice of topic, we have to refer also to the common origins of ceramic art and art therapy. One cannot ignore the fact that, from the perspective of magical necessities, the artistic act’s finality involves the anonymous artist in a unique psychological process, under whose pressure the created object itself is born. If we begin with the observation that the child’s play, originally unconscious, with the clayey matter, soft and docile (beginning with prints and ending with the first figurations in wet clay or sand) represents an immediate initiation in the creative process, we can understand the first contact with pre-art materials and processes, which constitutes the basis of creative education/art therapy using the ceramic arts.

Before approaching ceramics in its rapport with education and art therapy, we have to consider the sacred function of art, and the relationship between creation and psychology. There is a similitude between the field of ceramics, of the objects made through the metamorphosis of the primary elements (earth, water, air, fire), and human creativity, which aims at expressing one’s self and establishing a relationship with nature and Divinity. It is for this reason that I have focused my studies on the archaic period in the history of art, culture and civilization, as well as some aspects of folk art, the keeper of ancient models through tradition.

I have also focused on certain currents and movements, on certain artistic personalities from the modern and contemporary art history, whose visions reveal an essential link to the archaic period. This incursion into universal and Romanian art history is significant for my art therapy project, because the effort of discerning the creative mechanisms in visual arts (with a natural focus on ceramic art), has led me to adopt an essentially postmodern working style, and strengthened my belief that only an informed artist can effectively practice creative art therapy.

Referring to ceramics, an art domain that, through the reimagining of tradition, brings pottery along with sculpture in galleries and museums, Herbert Read wrote in 1964: “The rebirth of the connection with tradition may have a revolutionary meaning, along with the originality of technique and style” (9). The lesson that pottery, along with cinematic arts, sculpture, or other visual arts fields, teaches the arts is that of “critical simplicity of daily life”; in this “contextualized” understanding of pottery as “primary intervention in matter, human action and symbol, which includes simultaneously multiple projections in daily life forms and experiences, on levels that identify themselves with its entire identity... becomes a testimony of its entire existence” one can find significant suggestions for the practice of art therapy.

My creation as ceramic artist-designer integrates into Postmodernism, the postmodern vision of the human body, as a whole, as central theme in the identity of ceramic art, that opens up new expressive possibilities – from the symbolic language of anthropomorphism to the tactile evaluation through the use of hands during the use of an object – having also proved its efficiency in the field of creative education/art therapy. Through the own material characteristics of clay or barbotine and by turning to the styles of the past, one can express new meanings, rediscovering tradition and participating in the contemporary artistic experience. Tradition, innovation, craft, handicraft, ceramic art or ceramic design, each of them has relationships with all the domains of visual art that coexist simultaneously, influencing the quality of the environment. Ceramic household items, as synthesis objects– craft, handicraft, design and art – as they exist and are received on different levels, depending on their complexity degree, facilitate the use of all the senses in primary reception; environmental ceramics, a multi/inter/trans-disciplinary field, influences the environment’s quality. The creative process of these artifacts subordinates the processes of the related fields to ceramic art’s specific process – pottery being the oldest craft on the planet – encompassing their psychomotor dynamics. The creative flux triggered during the use of the potter’s wheel activates the person in a holistic way: the creative

process includes the entire body's dynamics; all the visual art fields are accessibly incorporated in the creative process, which is sequential, determined by technical phases, on levels of complexity degree through which a common goal is pursued: completing a finite object belonging to the domain of "fire arts" (the object is fired, decorated and used in different situations).

The topic of modeling is frequently treated as a determining factor for the field of sculpture, but common origins prove that sculpture and ceramic identify themselves in modeling; moreover, the artifacts modeled in ceramics and sculpture create a link with the environment. From the point of view of ceramics in artistic education, I wished to underline the unique and irreplaceable role of the visual arts, especially of ceramic art, in the education methods based on environmental pedagogy. That is why, in order to be able to tailor my working method to the needs of the beneficiary, alienated from nature, I have extended my study to some aspects of environment pedagogy, study that has suggested methods of educating the art public, the children, adolescents, young adults, but also persons with special needs, in natural or specially designed places, with reference to nature.

The quality of the artist-public relationship, important also for the future of art, can be used in art therapy; the similitude between the artist-public relationship with that of art therapist-beneficiary co-creation one, from the art therapy practice, impose the study of the artist's role in forms of art applications that integrate theories and practices of art pedagogy in a support environment – museum or art gallery. Through this approach I wished to underline the necessity of establishing, within museums and galleries, of permanent spaces with the purpose of educating the public, children and special needs persons.

Starting from J.L. Moreno's idea, that "All types of art sanctify their own space of influence and practice, they personalize the space of influence of the practitioners' psyche" (an idea applied in multimodal therapy), I have developed my own art therapy strategy, dependent on the necessity to establish a sensitive relationship between the beneficiary's cultural horizon and the means of art therapy, process in which the choice of space where the activity unfolds has an essential role. The selection of open-air section of the Ethnographic Museum of Transylvania "Romulus Vuia", as a creative and educational/art therapy studio, was not an accidental one, the beneficiaries being familiarized both with the natural environment and with the artificial one (traditional architecture and artifacts), contributing substantially to the activity's efficiency. The

privileged space offered by the open-air section of the Ethnographic Museum of Transylvania favored the experimenting, with visible educational/art therapeutic effects, of complex relationships: natural shape – shape of the human body – shape of man-made objects (in general) and the creation of personal shapes (of the beneficiaries). These are types of relationship between different worlds. In the modern world, they have been lost by many of us, generating dissociations in the environment, leading to an indifferent and overly-destructive behavior towards the systems of life of which we are also a part.

The use of nature as a medium for art therapy represents the preparations of certain techniques (belonging to ceramic design and contemporary ceramic art) based on the application of some basic natural principles: biomimetics, natural systems, processes as models, elements as inspiration sources in solving problems, mimesis, as imitation of nature, whether by using natural shapes taken from the environment, by prints or “stamps” from natural shapes, or by images of shapes (photos, drawings, nature paintings, processed sculptural shapes, moulds, etc.). These are creative methods applied in education/art therapy, taken from ceramic design and ceramic art.

To the same purpose, in the case that the educational/art therapy activity took place in an art therapy studio, or in the artist’s own studio, we have given a special care to the creation of an evocative and stimulating environment.

The postmodern aspiration, that of prolonging the reception time through the formal sequencing of my ceramic art compositions (the element’s cohesion being reached through the IDEA) and to actually involve the public in the creative process, through which we aim at the developing of a communion between artist – public/beneficiary, can also be found in my educational and art therapy practice, as a personal method, centered on ceramic, in my work with the children in the creative camps and in my art therapy and game therapy studio. To be “postmodern” in therapy, in Shirley Riley’s opinion (11), supposes a renunciation of programmed knowledge. It is necessary for the art therapist to become the “student” of the client and to “learn from each client the meaning of the situation that he brings”. Through the “co-constructive” therapy, along with the client, the art therapist became a collaborator in the therapeutic activity. This position required giving up power and determined a creative leap in therapeutic relationships.

The artist, working on expressiveness, lengthens the creative process, which is based on a symbolic route, its finality being an “artistic” object. This route is marked by “revelations-

indications of meaning”, that are less realizations of meanings (as required in classic psychotherapies), than of transversality, which highlights formal analogies between the productions, figures of alienated repetition of the subject, the history of his destiny and of the transference relationship with the art therapist, in the case of art therapy. Thus, as V. Preda cites Darrault-Harris and Klein, the interest in a psychosemiotics, which would objectify these analogies in a practical, is “a posteriori” research.

The artist, as the first spectator of his work, communicates with his budding images and with himself, he uses creativity and imagination as investigation tools, he learns throughout his plastic activity about the way in which the creativity, the imagination from the process of “making art” can lead to a profound understanding of the world through the creative act.

One of the most obvious developments in art therapy in the last decade was the return to the workshop and the development of a multitude of approaches based on it (like those described by Pat Allen, Carl Rogers and Shaun McNiff), that comprise Rudolf Arnheim’s ideas of “Art a Visual Perception” and especially those of “Gestalt Psychology and Artistic Form”, in turn related to Abraham Moles and Max Bense’s informational aesthetics, for whom information is an implementation of shape. Starting from these ideas, Shaun McNiff developed the multimodal method of art therapy, which has had a crucial influence in my own educational/ art therapeutic strategy.

In psychic diseases, which affect the entire human being in its biological, psychological, axiological and social complexity, the intervention of the art therapy practitioner is of great significance. The freedom condition of the sick individual being much diminished when compared to its own former existence, the therapeutic intervention is of great consequence and aims, in these cases, at the development of independence and communicative abilities. The purpose of art therapy, as a part of occupational therapy, is to mend the consequences of the disease that caused the disability or the handicap, the development of adaptive habits, so that a person with a certain degree of incapacity may be able to capitalize on his entire remaining abilities, in order to recover (both on a familial and a professional level), through the integration in a useful activity, at the highest accessible level.

The therapeutic methods of present age experiment with ways, specific to each art, of achieving interdisciplinary exchanges. They connect to fields such as psychology or psychiatry, anthropology, history, religion, in order to experience the primary therapeutic values of

contemporary art. Therefore, documentation in fields specific or related to visual arts, ceramic art, ceramic design (grammar of shape, psychology of shape and color, design psychology, history and theory of art and design, anthropology, philosophy, sociology, psychology, pedagogy, methodology of ceramics teaching, work psychology, marketing) unfolded throughout my entire career, the matter for my research topic being completed and updated especially with data from the fields of art therapy, psychiatry and psychology – general and applied.

Of great significance, in terms of theoretical documentation and especially regarding the improvement of my own therapeutic method, were three trips to the United States of America, which took place in 2004, 2007 and 2010, in Chicago. During these documentation periods, I have participated in courses, Open Studio workshops, I have visited Chicago institutes specialized in presenting art as process in education and art therapy (specially designed galleries for the education of the public, children and special needs persons). I mention: The Museum of Contemporary Art and The Art Institute Museum, The Cultural Center, DePaul University's "The Nomadic Museum", the latter focused on environment pedagogy. In the education concept of these institutions, the traditional understanding of certain notions and categories, such as art, exhibition, academic environment, is destabilized, while the significance of the art's addressability towards the public grows, through the conversion of the museum into a collaborative workspace (creative studio) for the community, and through the questioning of the cognitive essence of art: "What happens when we explore ideas through visual means?"

My participation in courses and workshops coordinated by Pat Allen – The Evanston Open Studio Galleries – "Connecting with the Creative Process for New & Continuing Students" and "Flourish Studios Envision Gallery", Chicago, had a great impact on my improvement as an art therapist, and implicitly on my concept for the elaboration of my doctoral thesis. They were accompanied by personal exhibitions of artists that presented the practice of art as a means of auto-integration, which leads to personal fulfillment, thus arguing for art's immediate therapeutic value.

Theoretically sustained by the structuring of information from the previously mentioned scientific fields, my doctoral dissertation is based on my own practice, both in the domain of artistic creation and in that of creative education/art therapy.

The ceramic art preoccupations, with an emphasis on cultural ecology and art therapy themes, manifested themselves even from the beginning of my career. Throughout it I have set

out to challenge the audience's creativity and freedom through visual, tactile, kinesthetic means, and through the Idea, prolonging the reception time by challenging the viewer's engagement on all levels. I have acted in a similar manner in art therapy, based on the observation that, if in therapy we use the therapist's works of art (when the therapist and the beneficiary create together or watch and comment together art reproductions), the extension of the reception time and of the focus of attention on observing objects and activities is achieved, an enhancement of the relationship between the art therapist and the beneficiary. I have also found that, through stimulations operated by ceramic installations (category to which most my works can be subsumed), both the viewer's lack of inhibition and the onset of the creative flux, and also the increase of the level of understanding of the work's message are efficiently achieved.

The ideational universe proposed through my artistic pursuits (that I desire simple, but not simplistic), concentrates the most abstract, most minimalistic levels of meaning, in an expressive precision of matter. I use the mimesis and the human figure in order to make my works more accessible and to increase their psychosocial impact. Also, I rely on the fact that the viewer can touch the elements of my composition, he can experience the differences in texture; excited by the modulation and structure of the work, he is challenged to change the position of the elements, in order to recompose the works according to his interior needs. In some of the art therapy sessions that take place in my own art studio, I allow the beneficiaries to intervene, even chromatically, on the modules, an extremely attractive activity for children and young adults.

Through clinical creative education/art therapy, as an art therapist, I support the interdisciplinary team in the clinical activity in each case, I use means specific to art therapy, based on the creative process and emotional intelligence (individual or of the group), intervening throughout the entire evolution of the beneficiary, by nonverbal means, characteristic of visual and other connected arts (multimodal intervention). I believe that the artist with nonverbal communication abilities, through the understanding of the formal expressiveness orientations that the arts adopt in their evolutionary dynamics, has, in clinical art therapy, a unique role and a fundamental significance in terms of: the art therapy (individual or of group) space design, the ensuring of an environment that facilitates therapeutic interventions through the use of volumes and of external space in channeling the psychic tensions towards the exterior; the coordination of a more tense and sustained psychomotor activity (in this case pottery) important for psychomotor relaxation – a basic phenomenon in relaxation techniques; the adjustment of certain materials

from the environment and their transformation into artworks, functional or handicraft objects, in order to highlight certain interior tensions, and also to ensure the discharge of psychic tension through catharsis, which will contribute to the increase in self-esteem and the rehabilitation of the socio-affective dimension. I underline that, through psychomotor training, the art therapist contributes to the discovery/screening, through visualization of traumas, abuses and their causes – in crisis situations – and to relaxation and dissolving inhibition – in post-crisis situations. Through the use of non-verbal language in the discovery of practical self-discovery aptitudes, art therapy plays a role in school and professional guidance, in the development of manual skills, perceptual qualities and spatial orientation as personality traits.

Since the documentation, activities and case studies in clinical art therapy have been realized within interdisciplinary teams (a neuropsychiatry doctor, a psychologist, a pedagogue, a social worker, an art therapist and nurses – each one having a specialized role), in the development of this work I have selected the cases in which art therapy had a central role in the therapy process (as in some cases medication, psychotherapy or speech therapy prevailed), and I have organized the case studies – diverse and personalized – based on the beneficiaries' characteristics, the art therapy methods and the objectives pursued. All the activities have been methodically documented using sheets, including also photographic images; in the daily meetings with the beneficiary, with their surprising, unknown reactions, I have always considered the significance of their “being” in context with others, with images and with the world, I have watched them, not from the point of view of those who look for pathologies and symptoms, but as beings which discover themselves, becoming self-creating. Therefore, I have focused on what the beneficiary's artistic expression uncovers, retaining any aspect whose development can lead to new and healthy possibilities of life. Using the potential unveiled by therapy, I have aimed at the beneficiary's advancement, by taking part in the artistic process, toward self-fulfillment and a meaningful life, irrespective of their degree of handicap. The case studies presented in the last chapter of the thesis highlight the results in terms of strengthening the self-image and of increase in self-esteem, in fact the common goal of every case of art therapy.

The approach to creative education/art therapy as an artist directly involved in the experimental process, as an “extension” of my own artistic practice, represents an experience of a new dimension of art, in a way that is explicitly more engaged, as the fact that I pass from one

context to another, from that of mental hospitals, to that of socially marginalized groups, or from the context of childhood to that of foreign students (within the Erasmus program), represents an important challenge for me as an artist – for me, the personal workshop became a meeting place, not only with the ceramic material (malleable, clayey) in which my personal ideas are transposed, but also with the human psychic material, both mine and that of my beneficiaries.

Within one's personal artistic activity (which is the base for artistic education and art therapy through means specific to ceramics), following the creative process which generates the artwork, occur certain changes in the individual psychic matter of the artist and the public – in case of art therapy, of the beneficiary – that materializes afterwards in another creative process, individual or joint, and can be finalized through the implementation of ideas (in this case, the making of artworks, of artifacts). It is a process of education – self-improvement – research – knowledge – creation – invention – execution, of provoking ideas and putting them into practice, process which, familiar to artists, is also implemented in creative education/art therapy, with the goal of developing the ability to assume the unknown, increasing a person's adaptability and finally his or her life quality, common objectives of both art and creative education/art therapy.

The theoretical documentation and the effort to systemize my activity as art therapist for the development of this thesis, unfolding in accord with my own artistic investigations, gave my artistic universe a new dimension – a newer and more explicit support and motivation. At the same time, this dissertation has a practical purpose: the enrichment and increase in the efficiency of the creative education/art therapy techniques, this work addressing, programmatically, young artists (especially ceramists) tempted by the practice of creative education/art therapy.

Summary notes:

1. RODRIGUEZ, Jean and TROLL, Geoff, *L'art therapie. Pratique, techniques et concepts*, Ellebore, Paris, 2001, p. 63
2. ARON RUBIN, Judith, *The art of art therapy*, New York : Brunner/Mazel, 1984, p. 350
3. PREDA, Vasile, *Terapii prin mediere artistica*, Presa Universitară Clujeană, Cluj-Napoca, 2003, p. 89

4. MALCHIODI, Cathy A., *The soul's palette: drawing on art's transformative power health and well-being*, Shambhala Publication, Boston, 2002, p.140
5. McNIFF, Shaun, *Art –Based Research*, Jessica Kingsley Publishers, London and Philadelphia, 1998, 2009, p.44
6. MALCHIODI, Cathy A., *Handbook of Art Therapy*, The Guilford Press, New York and London, 2003, p. 157
7. McNIFF, Shaun, *Trust the process: an artist's guide to letting go. Creative ability. Psychological aspects. Self-actualization (Psychology). Artist-Psychology*, Shambhala Publication, Boston, 1998, p. 78
8. SOMER, Robin Langley, and RAGO, David, *The Arts And Crafts Movement*, Saraband, Scotland, 2003, pp. 95, 97 on Arthur E. BAGGS, artist and director of „Marblehead Pottery”, expert in manual painting and decoration by incising of ceramics
9. READ, H., *The Philosophy of Modern Art*, Faber & Faber, London, 1964, p. 253
10. RAWSON, Philip, *Ceramics*, Oxford University Press, Oxford, 1971, p. 6
11. RIELEY, Shirley Apud ARON RUBIN, Judith, *Art-terapia: teorie și tehnică*, edited by Judit Aron Rubin; trad: Ilinca Halichias- București Editura Trei, 2009, p. 449

In writing this summary I used information provided by

1. READ, Herbert, *Modern Sculpture*, Thames and Hudson, London & New York, 1999, p. 136, 157
2. MARK DEL VECCHIO , *Postmodern Ceramics*, Thames & Hudson, New York, 2001, p. 15, 29, 135
3. ALLEN, Pat B., *Art is a way of knowing*, Boston: Shambhala Publications, Boston, 1995
Pat B ALLEN co-founder and former director of the Open Studio workshop, Chicago, IL, Director, Pardes Studio, Oak Park, IL; Adjunct Professor, School of the Art Institut of Chicago.
4. MALCHIODI, Cathy A., *The soul's palette: drawing on art's transformative power health and well-being*, Shambhala Publication, Boston, 2002
5. ARON RUBIN, Judith, *The art of art therapy*, New York: Brunner/Mazel, 1984
6. McNIFF, Shaun, *Art Heals. How Creativity Cures the Soul*, Shambhala Boston & London, 2004

7. CSIKSZENTMIHALY, Mihaly, *Flow: The Psychology of Optimal Experience*, Harper& Row, New York, 1990
8. GOLEMAN, Daniel, *Emotiile distructive. Dialog stiintific cu Dalai Lama consemnat de Daniel Goleman*, translation by Laurentiu Staicu, Editura Curtea Veche , Bucuresti, 2005

Keywords: artist, art therapist, creative education/art therapy, beneficiary, creative process, creative flux, clayey matter, pottery, artifact, synthesis object, holistic training, reception using all the senses, craft, handicraft, ceramic art, ceramic design, painting, sculpture, graphics, connected arts, multimodal therapy centered on ceramics, self-image, self-worth, self-fulfillment, life with meaning, socio-professional integration.