The Phillips Collection and IONA Senior Services

by Hyo Jeong Eun, 3rd year

As an art therapy intern at IONA Senior Services, located in Washington, DC, one of the great experiences I had was going on a field trip to The Phillips Collection, a museum of modern art. Every once a month, the art therapy program at IONA Senior Services and The Phillips Collection provide seniors with dementia and their family members a chance to engage in outdoor sensory activity. Twelve participants gathered together at the museum and viewed three paintings selected by specialists at IONA and The Phillips. To increase the level of engagement of discussion, the group followed these steps: looking at the physical appearance of the paintings, finding an emotional connection to the paintings, and then drawing what the paintings inspired within themselves. A curator of The Phillips Collection facilitated discussion by asking the participants about what they were noticing while looking at the pictures from the edge to the middle of the painting. Then, participants shared their feelings and memory related to the paintings. After participants returned to the IONA art studio, they were encouraged to use the museum trip as their inspiration to create art. Although they were highly engaged in the discussion at the museum, sometimes the artwork was not directly linked to their recent experiences due to their memory loss. However, in the moment of appreciating the paintings and the ensuing discussion, I noticed their active engagement and enjoyable affect. One participant stated in a peaceful manner, “I feel good now,” implying that the art allowed her to refresh her mind. From this experience, I learned that by expressing their feelings and sharing it with others, the seniors not only gained a sense of freedom and independence but they also became a part of the community. As an art therapist, I believe that it is important to give seniors more opportunities to access these sensory activities as it can increase their awareness and may decrease their isolation, eventually improving their quality of life. Art heals and connects at any age.
few weeks before my first day of graduate school I was surprised to discover that I was pregnant. My husband and I planned on trying to have children after I graduated; however, life had other plans for me. Of course, now, I would not change anything, as my son has been the greatest gift in my life, more so than I ever could have imagined. Pregnancy threw a proverbial wrench into my plans to graduate with my master's degree in two years. Instead, I extended to a three-year plan, which I will accomplish this August.

I found that there were many benefits to extending my educational track from two to three years. First, it allowed for a lighter course load (although even with the “lighter” load, it was an incredibly intense and challenging program). Secondly, it offered me the opportunity to really get to know and befriend the fabulous people from two different graduating classes. I can honestly say that I wholly feel like I am a part of both groups. On a side note, it also broadened my professional circle, which is always a good thing. Finally, it provided me the opportunity to work in the GW Art Therapy Clinic for an extra year. Having the opportunity to work with the same client for almost two years has irrefutably shaped who I am becoming as an art therapist.

In the beginning, a lot is done to build a solid and trusting therapeutic relationship, and the relationship with my client only continued to deepen as time progressed. As we became acquainted, I focused on practicing active listening, establishing positive regard, and being genuine with myself and my client. After forming a solid foundation of trust, I began to utilize what I learned in my trauma courses, helping my client to begin to understand and process his feelings through art and mindfulness. His art-making became more expressive as he was more able to feel and describe uncomfortable emotions. Eventually we were able to begin to process the trauma. We started this work in the first year; however, it was not until well into the second year that we were able to explore and process some very difficult life events. Having extra time to connect allowed him the time to feel comfortable sharing these traumas with me, and it prepared me to be able to be fully present for him through the process.

I often imagine that becoming a good therapist is like learning to ride the ocean waves. In order to stay upright, you need to learn how to flow with the ups and downs: to be balanced and true to yourself; to take notice of every detail, all of the patterns and changes; and to mirror and hold the emotions of your clients. It is not easy and it does not happen overnight; but when it does happen you are often able to facilitate and bear witness to true deep healing. As I am about to embark into a new chapter of my life, I feel so grateful to have been given the chance to take some of these first steps while still in the supportive arms of the GW Art Therapy Program. I have had the wonderful opportunity to see firsthand what art therapy can do for individuals over time, and it is an experience that will continue to support me through my career and will accompany me for the rest of my life.
What seems like a lifetime ago, I was a graduate student in the GW Art Therapy Program. The Program was life-changing for me in a variety of ways, the effects of which are even felt now. I learned how to sit with clients and help them express their emotions. I explored different forms of art so that I could have foundational skills to use with my clients. I discovered how to deal with the emotional impact of hearing client stories and create personal boundaries for myself. GW gave me the skills, knowledge, and emotional capacity to go out and become an art therapist. However, it also gave me deep and supportive friendships with similarly souled women.

One of these women was Helena (Lena) Hillinga. We became deeply bonded because of our similar histories growing up overseas and our connection through art therapy. We dreamed and planned and upon graduation, traveled for four months through the Middle East and Europe, meeting with counselors, social workers, art therapists, school leaders, NGOs, and anyone who would let us bring art therapy to their organization. We carried everything on our backs: art supplies, paper, laptop, camera, video, and shared clothing. We began in my country of birth, Lebanon, and ended in Lena’s home country of Holland. We experienced the call to prayer in the middle of the night while staying at a school in south Lebanon. We did art work with students in Athens, Greece. We shared ice cream with local art therapists in Florence, Italy. We rode bikes through Switzerland, with our hair in braids. We took an endless night train to Portugal. I got engaged in Paris, France, and we all met my in-laws for the first time and toasted with champagne. We collected over 150 pieces of art work and presented our research the following year at an AATA Conference.

Through the many years, Lena’s move to Seattle, changing jobs, getting married, numerous birthdays, and the birth of Lena’s twins we have deepened our friendship.

Two years ago, when Lena found out that I could not medically carry a child, she and her husband, Doug, offered me and my husband, Frederic, a true gift—to become a surrogate for our child. On June 4th, our son will be born with all four of us to witness his birth.

It has been an amazing process to witness such love and generosity. Both Lena and Doug have sacrificed in order to bring our dreams to fruition and to allow us to have the joy of parenting that they have experienced with their two children. The four of us have been deeply connected and bonded by this experience—we have become family.

We often think back to what created this friendship—the GW Art Therapy Program. As the Director now, this is the environment that I seek to create, modeling it after my mentors, Katherine Williams and Carol Cox. An environment where students not only learn and explore and grow professionally and clinically, but one where they can bond and create deep connections emotionally with others. The possibilities are endless and often unimaginable, but sometimes they begin with the smallest of seeds in the most unassuming of places.

Next Fall, Drawn from the Circle will focus on alumni updates, memories, and reflections. We would love to have you share with us your unimaginable journeys that began in the GW Art Therapy Program.

Send to artx@gwu.edu, with Drawn from the Circle, in the subject line.
For the past two years, I have worked diligently on familiarizing myself with a culture that I hope to serve. In an effort to develop a suicide prevention curriculum for the Oglala Tribe of the Lakota on Pine Ridge Reservation, I attempted to steep myself in cultural norms and history. What I hoped to learn was not possible until I saw everything with my own eyes.

In July 2012, I traveled to Pine Ridge Indian Reservation for a week in order to pilot interventions that I sought to include in the now developing curriculum as my culminating research. What I did not expect was the welcoming world of the reservation in spite of the insidious trauma that occurs there.

My faculty supervisor, Elizabeth Warson, drove us through the Badlands National Park to the reservation (affectionately referred as the “rez”). Throughout the week, Elizabeth introduced me to different families and sites on the reservation. I completed three workshops for my curriculum. The first prototype tested was the directive to personalize a small cigar box for the purpose of containment. We utilized the Inside/Outside box theme, where children were asked to create images of how they view themselves on the outside of the box, while the inside of the box was to be dedicated to special meanings, memories, or qualities about themselves. The idea was to create a personal space for identity and to portray how suicide may have affected the individual and his or her family.

Most of the children, coming from a background of extensive poverty and sometimes abuse, were amazed at the simple opportunity of receiving the box. It was difficult to encourage the children to move past the novelty of the item and to consider the creative possibility that lay inside and outside the box. However, the excitement of the children was infectious, and I found constant smiling and encouragement from the elders present. It was a stable, spiritual system of support that created a containing effect. I felt a precarious balance of respect and warmth as an art therapist; I was careful to be respectful of tradition and zealous to reciprocate the warmth being given to me.

When not holding art therapy sessions, I would ride with Elizabeth into Pine Ridge to meet friends or acquaintances of hers. The only word I can use to describe the poverty was powerful. I recall walking into a friend’s trailer and automatically thinking, “How does someone live in these conditions?” I immediately felt guilty for thinking it afterward. Rooms and windows were boarded up, there was no air conditioning, and dirt was everywhere. Bugs surrounded every homestead—more than just flies, there were countless spiders, roaches, and pests along with the many unfriendly stray puppies that wandered through neighborhoods. I even found a four-foot snake taking a leisurely journey down the drive of the bed and breakfast in which I stayed.

Despite the conditions, the faces I met were smiling. There were handshakes, hugs, and countless greetings. I came into the community feeling like a voyeur and left feeling like I had found a new branch of distant family members I did not know existed.

Upon return, adjusting to DC was difficult. I burnt sage, that I had picked from the sun dance grounds, each evening to communicate a sense of connection and honor to the culture. I worked earnestly to process both the clinical material I gathered and the emotional material that consumed me.

Cigar boxes still litter my apartment. Some have found meaning inside and out; some remain empty, waiting for someone to assign meaning. Inside one particular box, I painted and stamped the word “WISE”, what I will take from my brief time with the distant hospitality that was kind enough to show itself to me on Pine Ridge Indian Reservation.
The Importance of Cultural Competency
by Stephanie Tyler, 2nd Year

After visiting a massive shopping mall at the beginning of our diversity course in India, I reflected on the profound contrast between traditional and modern life in India. I witnessed youth and elders embrace Western influences, the blue jeans, fried chicken, and American music. Outside the mall, women dressed in colorful saris, snacked on spicy pani puris, and prayed. I wondered in my journal, “How do they preserve their culture? How are they changing what it means to be Indian? Are they aware of what is happening? How can they keep traditions alive?” Meditating on this, I am fascinated by my parallel experience. In writing this paper, I am asking myself the same questions: How is India influencing changes in my life? How can I keep or change traditions? Am I aware of what is happening to me? How should I negotiate or integrate these new experiences? Answers to these questions stream in and out of my daily life, as I grow in self-awareness, realize new knowledge and skills gained, reflect on the personal changes I am experiencing and consider how this growth will affect my work as an art therapist.

Gaining knowledge about cultures requires not just learning from textbooks and films, but must entail first hand experiences. Observing Indians interact with one another helped me to see how their values are expressed in their environment and relationships. Although I love to travel and am inspired by people from other cultures, I cannot deny that I have a comfort zone and that it is very much embedded in white, Euro-American values. I realized that I need to continue to deal with and identify my own biases so I do not unwittingly communicate them to a client, impose my own coping strategies, or over or under pathologize.

My experiences in India highlighted that as a future therapist I must understand the worldview of an individual and assist him or her in reframing that view so it is more tolerable, safe and fulfilling for them, not for me. I now understand that therapists must be flexible and creative in the development of culturally appropriate intervention techniques when working with multicultural populations. Cultural competence must be an ongoing process of self-reflection and evaluation, staying informed, forming friendships with individuals from diverse groups, expanding social justice, and unlearning the monocultural lessons and views like the ones I learned early on in a white-dominant society. I have grown to understand that it is vital to open dialogue on cultural issues, to ask questions and to listen to multiple perspectives. Traveling with a therapist’s point-of-view and the opportunity to make art and journal through our daily ritual helped me to unleash my biases without fear of attack or shame.

With the increased globalization and modernization of India, cultural values are changing, which changes the role of therapy. Observing the divergence between traditionalists and modernists among Indians was a strong reminder that each person holds his and her own unique arrangement of cultural values that cannot be generalized. The therapist must determine, and not assume, the worldview of the client. Obtaining basic knowledge about a client’s culture can give the therapist a frame of reference of the potential cultural elements influencing that client’s worldview. I must be careful to ensure that approaches I am using are culturally relevant to the client, and not based on White middle-class norms or inappropriate generalizations.

In my final art piece documenting my journey in this course, I reflected on the universal ritual of art making. The photographs tell a story about the aspects of culture that are learned but subject to change. The images depict the henna on my hands fading by the day, as I reintegrated into American culture, fad ing the impact and memories of my cultural immersion in India. Feeling the need to make the impact last and visible, I reapplied the henna after returning home, tracing over the faded orange lines that remained. A few days later, the henna disappeared altogether, leaving no trace. As I am mourning the loss of the image on my hand, I feel that I am also celebrating my desire to feel deeply connected to a different culture, to its rituals, customs, and people. While I must work to understand cultural differences, I must not lose sight of the humanness—the creative impulse and raw emotion—that connects us all.
Ritual In Making  
by Ali Piacente Haefner, 2nd year

Last summer in India, music played while fifteen of my classmates and I, led by our professor, Heidi Bardot, poured ourselves into our watercolor paintings and journal entries. As part of our multicultural study abroad trip, we participated in ritual art-making to help process what we experienced each day. Some of us made images about a memorable event or incident that happened at our internship sites. Others reflected on a fleeting moment when we felt sad, scared, or excited. I cherished the ritual as it helped me cope with being in a different country with a completely different culture.

A few months after we returned, I got married to my best friend in the middle of the hardest semester of the Art Therapy Program. We waited to take our honeymoon so that it coincided with winter break and spent 3½ weeks touring the beautiful country of Argentina. One of my goals for traveling was to do the art therapy ritual to help me process another culture and also to have something unique to remember the experience.

The art therapy ritual helped me reflect not only on Argentinian culture, but also my relationship with my new husband. Through art, I was able to communicate how I was feeling and what I needed in that moment. Though most of the trip was bliss, we had our share of cranky mornings and hunger-inspired disagreements. Making art helped me reflect on the process of becoming husband and wife and how traveling together was such a beautiful metaphor for how we would get through future challenges together.

When I think back to my honeymoon, I often do not have words to describe the taste of red wine on a lazy day in Mendoza, or the feeling of being on a motorcycle with my arms gripping my husband’s waist, but my paintings have emotions tied to them and instantly bring me back to that moment in time. These memories convey so much more than words.

Coping with the Death of a Client: An Art Therapy Student’s Grieving Process
by Natalie Thomas, 1st year

As a first year art therapy student, I have spent the past semester redefining various aspects of my life. Graduate school in the counseling field is something you can never fully prepare for. It allows you to create new eyes to view the world, and everything you thought you understood, gets shaken up a little bit. I began my semester excited and optimistic about this profession, but very unsure about what embracing the profession would entail. One of the unexpected surprises of my current experience with training is dealing with death.

I am an intern at Greenspring retirement community. I work in an amazing program that provides creative arts therapies for those diagnosed with various forms of dementia. This is an environment I never imagined working in, but now that I have experienced the power and healing of art in a population that is often grossly stigmatized, I can hardly imagine doing anything else. However, with this population comes the inevitable—many of my clients are at the end of their lives. The losses I have experienced were heartbreaking. Upon learning of the first death, I went through a roller coaster of feelings about the death of a woman I had known for such a short time. But I had held the responsibility of partnering with her on her journey and hopefully enhancing her life in some way, however small. With the encouragement of my supervisors, I realized that I must develop a plan for grieving. Death will continue to occur, and I must honor the life of each person, without allowing it to hinder my presence with my other clients.

My supervisors have a ritual to deal with loss—creating an art piece using a domino as a canvas for each person that passes away in our program. One of my goals for traveling was to do the art therapy ritual to help me process another culture and also to have something unique to remember the experience.

When I think back to my honeymoon, I often do not have words to describe the taste of red wine on a lazy day in Mendoza, or the feeling of being on a motorcycle with my arms gripping my husband’s waist, but my paintings have emotions tied to them and instantly bring me back to that moment in time. These memories convey so much more than words.
Self-Care Tips for the Busy Grad Student
by Melinda Griffith, 1st Year

One of the first readings assigned when we began the GW Art Therapy Program was about self-care. My initial thought was: “Why are we reading about this so soon? Knowing how draining this work can be is only making me more anxious.” But as I look back several months later, I get it. Self-care, how to identify what works for you and gauging when and how much self-care you need is vital to us as students and trainees and will continue to be an important part of our professional lives after we graduate.

Self-care is a topic I have discussed often with my fellow 1st years. At times it is referenced in jest: “I’m going to eat these candy bars, SELF-CARE!” but we also share our more concrete self-care forms and techniques. Some found it easy to identify these but more difficult to develop a routine. 1st year Natalie Thomas describes her issues with a self-care routine: “My self-care is in the form of eating healthy and exercising. I have tried to improve in both of these areas and notice a huge difference in my stress levels when I do. Self-care changes with circumstances with me, but I have found that when I stick to some routine and structure, it is more effective. I have still not mastered maintaining self-care in a healthy way, but I have learned much more about what I need to remain healthy mentally and physically.”

Others struggle with balancing self-care time and the time required to study for school. When is it okay to skip a reading so I can take a break and see a movie instead? 1st year Nina Salzberg found exploring the city a beneficial form of self-care: “As for going out with friends, I have to say it was hard to find time at first. I wanted to be open to new friends and the whole experience of living in ‘the city,’ but I was scared of losing precious homework time because from what I’d heard, you couldn’t have a social life and go to grad school at the same time. I needed to get out of my apartment for at least a couple hours, so I forced myself to get involved in planning social outings so I could get out of my desk chair and go!”

I practice many different types of self-care. Like Natalie, I work out, like Nina, I enjoy exploring the city with friends; I have a routine each night of lighting candles before going to sleep, and, like most of the students I have spoken to, I am about to start seeing a therapist as well. It is important to get assignments done and absorb as much information as we can, but it is just as important to take a moment to breathe, to laugh, and to LIVE. So my advice, whether student or not, is to find out what forms of self-care work best for you and make time for them.
**Zentangle 101**  
*by Jackie Biggs, 2nd Year*

On Saturday, April 20, 2013, PATA and GW hosted a workshop led by Chelsea Kennedy, MA, ATR-BC, a certified Zentangle Teacher (CZT) and GW Art Therapy alumna. More than 30 art therapists and art therapy students came eager to learn and practice the Zentangle method. The following are some questions and answers that were addressed during the workshop:

**What is Zentangle?**  
Zentangle is the marriage of “zen” (meditative relaxation) and “tangle” (beautifully drawn patterned artwork). Zentangle is a drawing method in which the person drawing maintains a high level of focus and concentration while he/she draws repetitive marks according to specific structured patterns. Through practicing Zentangle, the person drawing enters a state of flow and relaxation. Zentangle promotes mindfulness, as there is no judgment and one’s attention is focused on their marks at the moment and not on the end-product.

**What materials are involved?**  
Participants received personal canvas Zentangle bags with the following materials: special fine-quality paper produced in Italy, an eraser-free Zentangle pencil, and a micron archival pigment ink .25mm line pen.

**How is it different from doodling?**  
According to Chelsea, doodling is something you may naturally do without paying much attention and while simultaneously doing other things. Drawing in the Zentangle method, however, involves creating marks according to structured patterns and requires a high level of focus and concentration.

**How many patterns are there?**  
There are approximately 116 official Zentangle patterns, and zentanglers are always welcome to create their own designs. At the workshop we learned how to create five designs: hollobaugh, printemps, bales, Rick’s paradox, and crescent moon.

**What are the applications to art therapy practice?**  
There are several metaphors that can be made between the art of Zentangle and that of life which can be brought into art therapy practice. For example, the pencils have no erasers, like there are no erasers in life. Chelsea articulated the parallel by explaining how we do things deliberately, and we make the best with what we have. Workshop participants discussed how the Zentangle approach would work well with a variety of populations, from children with ADHD and autism to adult mental health patients.

If you want to further explore the art of Zentangle, check out [www.zentangle.com](http://www.zentangle.com), *The Book of Zentangle*, and experience zentangle with the Zentangle Kit.

Author’s note: Zentangle 101 was originally posted on April 23, 2013, on the Potomac Art Therapy Association blog. Check out [www.potomacarttherapy.org](http://www.potomacarttherapy.org) to learn more about PATA’s past, present, and upcoming activities.

(LEFT) 2nd year art therapy students Sarah Pitkin and Whitney Maclin practicing the art of Zentangle.  
(RIGHT) 1st year student Valerie Pusatari working on her Zentangle drawing.
It can be a challenge getting to know students within a school setting, particularly when so much time is spent on behavior management and developing coping skills. The time I have spent working with children on a group mural at Laurel Ridge Elementary this past year has proven invaluable in creating a closer client/therapist relationship. As a 2nd year intern, my placement within Fairfax County Public Schools focused primarily on children (ages 5–12) on the autism spectrum with emotional disabilities.

The current mural is the second one created in the ED Program space. Like the previous one, started by Monica Dreyer, GW alumna, it is designed using characters from children’s literature, providing an emotional connection for the students enthusiastic about depicting their favorite characters. The results were successful in facilitating positive interaction for the students.

The process of designing the mural began last year with students submitting ideas for characters. Based on these suggestions, a sketch was created by Amanda Vallellanes, then 1st year intern. Mondays, when students attend school for a half day, they receive special individual or small-group time in art and music therapy. Therefore, on a rotating basis, I worked with students individually to paint different sections of the mural. Once the base was finished, Stacy Mehlberg, my supervisor, and I included details and shading. The mural should be completed by the end of the school year in June.

Unique therapeutic advantages have come from this mural time. Students who typically were quiet during class became quite talkative in a more private setting. The painting on a school wall also proved to be a good exercise in impulse control. The regressive nature of paint allowed students to break out of their typical rigid artmaking and explore a new process. In addition, students gained a sense of pride in contributing to the greater school community.

As a student therapist, this was one of the few times I created art alongside the students. Too avoid becoming too involved in my own process, this was good practice in attuning myself to the children’s process and needs. They were able to see me as someone who does make art and who can work through frustrations related to it. I see the group mural process as a large factor in knowing my students on a personal level and looking forward to Monday mornings.

Special thanks to Stacy Mehlberg, Monica Dreyer, Amanda Vallellanes and faculty of Laurel Ride Elementary School for their contributions to this project.

Artwork by Susan Lee

Cartoon by Melinda Griffith
The Graduate Art Therapy Program will be holding its second Art Therapy Research Day on June 3rd. Graduate students will present posters on their culminating projects from 10-1pm; oral presentations on IRB-approved student studies will take place from 1-2:30pm; and this year we will have our first Thesis Defense from 2:30-3:30pm. Please join us for these exciting presentations of student work.

Poster Sessions 10am – 1pm:
Alison Bernstein: Finding Support: Art Therapy with Siblings of Pediatric Oncology Patients
Dara Gervais: ARTful Birth: Art Therapy for Childbirth Preparation
Anna Goist: Creation Story
Ali Piacente Haeffner: Artful Cooking: A Mindfulness-Based Program for Adolescents
Brooke Hoffman: Changes in Symptoms of Depression as Reflected in Person Picking an Apple from a Tree (PPAT) Assessment Drawings
Whitney Maclin: Art Therapy in India: A Program Design for Women with Mental Illness
Laura Miles & Alex Norby: Developing a Trauma-Based Art Therapy Program for Involuntarily Displaced Children
Katelyn Moore: Using Grid Drawings to Teach Portraiture to Individuals with Prosopagnosia: A Case Study
Stewart Morgan: Creative Life Books: Making a Difference in the Self-Concept of a Child in Therapeutic Foster Care

Molly Muraca: Art Expressions: An Art Therapy Program for Emotionally Disturbed Youth in Schools
Kristin Ramsey: Art Within Reach: Art Therapy and Yoga for Female Ex-Offenders Navigating Re-Entry
Cara Reiner: Normalizing Mental Health in the Military with Art Therapy (NHM-MAT): An Advocacy Program
Jeongeun Song: Cultural Differences in Normative Graphic Features
Jeeyoung Suk: The Child Diagnostic Drawing Series (CDDS) as a Measure of Trauma Indicators
Amanda Vallellanes: Art Therapy and Language Acquisition in Children with Autism
Liani Vazquez: Developing a Puerto Rican Family Art Therapy Theory
Natascha White: RATE: Reduction of Aggression Through Expression: A Program Design Focused on Autism, Aggression, and Art Therapy

Oral Presentations 1-2:30pm:
Jacqueline Jones Biggs: Empowering Victims of Bullying Through Participation in the Solution-Oriented Art Therapy for Bullying Victims Intervention
Julie Blankenship: Suicide Prevention for American Indian Youth: An Art-Based Curriculum
Stephanie Tyler: Group Photo Therapy for At-risk Adolescent Girls

Oral Thesis Defense 2:30-3:30pm:
Mark Borys, Understanding Sexual Identity: An Art-Based Narrative Inquiry

2013 Art Therapy Research Awards

The Kwiatkowska Research Award
The purpose of The Kwiatkowska Fund is to honor Professor Kwiatkowska’s research, clinical work and teaching legacy. Hanna Kwiatkowska was an Adjunct Assistant Professor in the GW Art Therapy Program and pioneered clinical work in family art therapy and introduced art therapy in the research program at the National Institute of Mental Health.

The Katherine J. Williams Fund and The Prasad Family Multicultural Student Award
The Katherine J. Williams Fund, former Director of the Art Therapy Program, and endowed by The Prasad Family Foundation, an alumna of GW Art Therapy, was established to support diversity in

Anais Lugo-Axmann, Meagan Oliphant, Michael Pretzer, and Ruth Dickson, Impact of Art Therapy on the Symptoms, Treatment, and Costs of Pediatric Asthma
Nisha Tracy, The Effect of Art-Making on Cortisol Measures
Jee Young Suk, Child Diagnostic Drawing Series (CDDS)
GW Research Day

The annual GW Research Days event took place April 2-3, 2013. The event presents GW’s research and creative scholarship through poster sessions, presentations, and guest speakers. For abstracts on each of these projects, please explore this link:

https://research.gwu.edu/sites/research.gwu.edu/files/downloads/2013_RESEARCHDAYS_Final.pdf

They say there’s a light at the end of the tunnel,
But right now I am walking around in the dark.
Making sure I don’t circle around the same place,
Before moving on, I leave an obvious mark.
I can’t even see my own hands and feet,
The contrast is none too stark.
I am hoping of any type of illumination,
A lighter, a match, a spark.

I once heard a woman say, there’s a light at the end of the tunnel—
Just hope it’s not a train.
She experienced the darkness of cancer and chemo,
But during treatment, did not once complain.
Just as the sun always comes out
After the clearing of the rain,
It’s always a wonder how such stories of beauty
Can originate from a place of deep pain.

There is a light at the end of the tunnel
I see it happen every day.
This does not mean that dark days will no longer exist,
Or all your troubles will go away.
But it is encouragement for you to hang on and stay in there
As the winds of life cause you to sway.
So, each time you hear this overused phrase,
Take it to heart and know, it’s going to be okay.

A Light
by Katelyn Moore, 2nd Year

(upper right) Gabriela Schmulevich: Diagnostic Criteria for Autism Reflected in Graphic Features of Artwork
(below) Jacqueline Biggs: Empowering Victims of Bullying Through Participation in the Solution-Oriented Art Therapy for Bullying Victims Intervention
Mark R. Borys: Understanding Sexual Identity: An Arts-Based Narrative Inquiry

Stephanie Tyler: Group Photo Therapy for At-risk Adolescent Girls
(not pictured) Meagan Oliphant, Anais Lugo, Ruth Dickson, Michael Pretzer: Impact of Art Therapy on the Symptoms, Treatment, and Costs of Pediatric Asthma

Meagan Oliphant, Anais Lugo, Ruth Dickson, Michael Pretzer: Impact of Art Therapy on the Symptoms, Treatment, and Costs of Pediatric Asthma
As interns for the GW Art Therapy Clinic (GWATC) for the past year, Stephanie Tyler and I have been given real opportunities to exercise our professional presentation skills. On a number of occasions, we have been invited to discuss the basics of trauma treatment and how it influences our practice with our clients.

In January of 2013, we were invited to speak about trauma work with GW's Invisible Children organization, whose focus is on children in the Darfur conflict. We shared the basics of trauma treatment: establishing safety, processing the trauma, and finally reconnecting to the world. We shared several case examples in order to provide a colorful illustration on how we use these steps in a more concrete manner.

In March, we visited Howard University, with Tally Tripp, our supervisor and GW faculty clinic director, to give the social work program a better idea of how art therapy is a treatment of choice for trauma.

In April, we provided similar information to the GW school counseling department. In an evening of perspectives, we gave a brief round of presentations showcasing how school counselors might use expressive art as a means of communication with their young clients.

Throughout my year in the clinic, a specific goal of mine was to develop my case presentation skills. There were a wealth of occasions in which to practice this skill. In the future, I hope that the institutions connected to the GWATC continue to seek information and ask questions so that future interns can connect and share.

**Is This Love?**
by Valerie Pusateri, 1st year

On February 16, 2013, I discovered a different way to look at love. “I had always considered love needing time to build and grow,” even when I admit to loving the feeling of being ‘in love.’ When I attended the Creative Wellbeing Workshop called *Miniature Shrines to Love and Humanity*, my view expanded. “We looked at the work of Barbara Frederickson, who posits that love is a micro-moment of connection you share with another person—a possible flash of emotion and positive regard shared just as readily with a stranger as a sibling.”

Throughout the day, we created artwork that examined our own relationships and understanding of love. Smith Center and Creative Wellbeing Workshops provided an abundant and eclectic variety of materials to explore. The attendees transformed Altoids tins into beautiful and personally meaningful shrines. “Before this workshop, I didn’t like using found objects in my art. But with so many little boxes filled with beads, buttons, playing cards, fabric, sea glass, figurines...it was like hunting for treasure.”

As a student of art therapy, I have experienced the therapeutic benefit that comes with making art. “At some point during the day, I found a tremendous sense of calm. It was meditative to focus on the process and not worry about the outcome. To follow the bliss; follow joy right in that moment and into the next.” My feelings were shared with fellow participants and by the end of the day the room took on a new energy. “I felt connected to people I had just met and I carried that feeling through my commute home and into my interactions the next day. I guess you could call it... love.”