

## **CREATING LEGACY**

by Katherine Kaliban & Rachael Wuensch



Artwork by Amelia DePrez, photo courtesy of Kou Vang

#### **MISSION**

by Rachael Wuensch

The Mount Mary University Graduate Art Therapy program is committed to preparing its students to become compassionate art therapists through academic, artistic, and experiential learning. By providing encouragement, empowerment, and the guidance to achieve each individual's therapeutic and occupational goals, we believe the members within this community will go on to make their mark within the art therapy profession.

Through this community newsletter, the Graduate Art Therapy department strives to create a platform that allows all members to share their voice, recognize achievements, and provide academic and professional resources, reminders, and opportunities within the art therapy community. By constructing this newsletter it is our goal to foster a new avenue for connection, community, and creation.

#### A Q&A with Retiring Professor, Dr. Lynn Kapitan

by Katherine Kaliban and Rachael Wuensch with Dr. Lynn Kapitan



Dr. Lynn Kapitaan

Q: How many years have you been teaching at Mount Mary and what was your role in creating the Master of Science in Art Therapy? If you had to add up all the hours you've spent reading and editing papers for students, how many hours do you think it would be?

A: It's a bit odd to quantify my career in this moment of leaving the art therapy department that I helped build and was a part of for 36 years. But I would guess that I've spent about 10,000 hours teaching, another 15,000 administrating programs, and maybe 10,000 hours reading and providing feedback in my classes, including over 120 master's theses and 38 doctoral student dissertations.

I started at Mount Mary College in 1985. I'd been working as a school art therapist and happened to be the only person in Wisconsin with a master's degree in art therapy, having gone to Pratt Institute in New York because there weren't any programs in the Midwest vet. As the founding direction of the MS/AT, Mount Mary's first clinical master's program, I designed a studentcentered program that-through innovations like weekend and intensive classes and retreats—created access for working students who would not have been able to earn their degree otherwise. As the only full-time graduate faculty member, I diversified our resources by inviting art therapy pioneers like Judy Rubin, Cathy Malchiodi, Myra Levick, Don Jones, Shaun McNiff, and even Bruce Moon, to come on weekends and teach our students. Our first master's class graduated in 1991, exactly 30 years ago. The profession was so new and so precarious at the time, with few internships and no jobs at the master's level. In some respects, it was like trying to survive in a desert, looking for water holes by following scant trails and signs left by helpful allies. One of these trails was Wisconsin's art therapy licensing and regulation effort, which I led in its earliest phase to secure jobs and recognition as a profession—a pre-Internet, hard slog through state hearings before dismissive legislators and cutthroat gatekeepers.

Q: How long have you been involved in the American Art Therapy Association? How many hours did you read and edit Art Therapy? How many publications have you written?

A: It's fun to start a program, but sustaining it is a whole different matter, especially in the desert. I didn't always get it right and made many mistakes along the way. I got involved in the American Art Therapy Association as a lifeline of information and support in a rapidly changing health care environment. In 2001 I was elected to the leadership, serving as AATA president and president-elect from 2002–2005. Soon after, in 2006, I became the Editor of Art Therapy and faced the formidable task of modernizing the Journal to get it online, searchable, and accessible world-wide. I was its longest-serving editor, for 10 volume years (40 issues), meaning that I'd read, reviewed, and edited over 1 million words written on the field of art therapy. But what I loved most about the job was all the collaboration that went

into each issue-from managing the reviewers and associate editors, to coordinating with production staff and databases, to working intimately with authors from all over the world who submit their papers, hoping to get their work published and read by other art therapists. This connectivity gave me a world-wide view of how art therapy moves across borders and seeds new ways of thinking and being, which I integrated into my classes. It also led to invitations by art therapists to keynote 18 international and national conferences, including Singapore, Australia, Israel, Spain, Chile, England, Finland, and just this past year in Indonesia. A conference that I helped plan in 2019 brought together AATA and the British art therapy association for the first time, from which we co-edited a new international research-practice text. And yes, I have written close to 50 articles and editorials over the years, in addition to four books, 10 book chapters, and about 100 conference presentations and workshops.

## Q: How did your ideas about art therapy and your identity as an art therapist, educator, pioneer, and leader evolve?

A: Reflecting back on my career, I see my concept of art therapy as always moving toward a less isolated, more conscious and socially just practice that informed my teaching. I have challenged my students to think beyond an ethnocentric, "universalist" view, and to question accepted ideas about art therapy that may no longer be true in this changing world. Closest to my heart is the work I began 20 years ago when I was invited by Cantera, a Nicaraguan community development organization, to integrate art therapy into its rural and urban community projects. Co-researching with street kids who grew into empowering community leaders, for example, or mural making to bring rival gangs into dialogue as another example, I witnessed how art therapy can help change the trajectory of whole

families, neighborhoods, and communities. To be an art therapist on Cantera's terms, however, I've had to function like an art material: as a shared, malleable resource in their hands, maximally responsive to their needs. This turned my understanding of art therapy upside down, shifting the power from the art to the people using the art for their own self-determination—and then multiplying its effects that others may benefit. Beyond the mental and emotional wellness of groups and individuals, my Nicaraguan partners use art therapy to attend to the health and transformation of their society. Cantera also was the site for cross-cultural art therapy internships that I led for graduate art therapy students, in addition to a program in Peru.

Then, about 10 years ago, I was tapped by Mount Mary to create the first professional doctorate in art therapy in the country. Coming fairly late in my career, it was a tremendously joyful experience. I had a chance to shape what an art therapist practicing on the doctoral level looked like: drawing from all my experiences in the "desert"



Dr. Lynn Kapitaan

where art therapy must thrive, I knew we needed art therapists who could advance art therapy beyond their current clients by taking a systems approach and developing their gifts as transformational leaders, practitioner-researchers, and ethical, culturally sensitive supervisors and teachers. They are now teaching the next generation as well as generating jobs for master's level art therapists.

#### Q: Of all your accomplishments as educator, pioneer, leader, what are you most proud of?

A: When I think about your questions, "what was my role?" and "what am I most proud of?" I realize that what I'm most proud is the role I have been able to contribute, however imperfectly. I have been a bridge and translator, connecting people who sense there is something called "art therapy" with the people, resources, and possibilities to bring their dream to life. Bridging art and science, campus and community, generations of art therapy pioneers locally and around the world, and translating the vocabularies of art, research, policy, ethics, and culture as I went along. Over the years, I bridged depth psychology with neuroscience, social action with critical community work. I learned to navigate as a non-Catholic working in a Catholic culture, and



Transformation in Nicaragua, Dr. Lynn Kapitaan

as a bilingual art therapist outside the mainstream. My studios were borrowed classrooms, lunchrooms, utility closets, and even my car. Later, I brought art therapy into community spaces—plazas, shelters, church patios, board rooms, open fields, and back porches. Moving into spaces and across systems, I have been guided by a creative flow that grounds the work in imagination, strength, and personal or collective power.

As a result, I have come to think of art therapy as not so much a profession as many "communities of practice" camped along a river of creative energy that sustains them. Some art therapists practice in hospitals and clinics, some in schools and shelters, others in community studios or online. Some start out in one place and then move to a different "encampment" that fits them better than where they started. These art therapy communities are interlinked by geography, generations, passions, and struggle. The river of art and creativity sustains us all; we must tap into its flow to stay flexible, healthy, and alive, so as not to burn out or absorb the toxins and trauma from our work, and project them onto others. I've traversed many of these sites along the river, learning new things and passing them on to others. For this reason, I have always experienced my work cross-culturally, reaching into and across the borderlands within the larger systems and structures that shape our practices.

#### Q: What advice would you give the next generation of art therapists?

A: This image of art therapy as a multiplicity informs the advice I would give you, the next generation of art therapists. It is tempting, I think, to see art therapy in heroic terms: guided by your passions and personal knowing, you commit to venture out and bring your light into dark places, empowering and transforming everyone who is touched by your art. I started out in this way but over time learned to become, instead, a partner who is willing to let go of my impassioned agenda so as to tap into collaborative energies that bring about change—something I could never do alone. I've also learned that anything worth doing takes more than one generation, and this tempers my activism with patience.

It concerns me that so many art therapists identify as technicians,

defining their work functionally; that is, by their doing rather than their being. I hope that you will go beyond this and be an artist and craftsperson who approaches everything as a practice of therapeutic artistry. When art is perceived as something that occurs between people, as an exchange of consciousness, we can realize so much more of art therapy's potential. My advice is to practice art therapy by way of a worldview: your unique perspective as an artist that, when you bring it to therapy, you help change the way people see and think about their realities. Your gift is in how you pay attention to them, listen, and respond.

I think it is critically important as art therapists to not keep ourselves apart. We might think we are special, pushing against a world that is indifferent to us. If I've learned one thing, it's that art therapy needs our collective energies to grow as a profession, and that requires durable relationships not only with our clients but with our colleagues in other professions, administrators and policy makers, families, and the communities in which we work. Nothing in this world is as stable and solid as we may think it is. If we cling to rigid boundaries and expect certainties, we will be disappointed as well as limited in our usefulness in this world. You have dedicated yourself to a wonderful profession, but it is still precarious and could disappear overnight if you aren't paying attention and think someone else is taking care of things for you. Adopting an attitude of dynamic inquiry will serve you well.

More than anything, I hope you will live the truth that diversity is essential to our survival, and not simply because different voices are present. We cannot thrive otherwise. I wish you well on the journey. May we meet again sometime, whether or not we know it, in the movement of light and shadows across the landscape, in the rich and varied currents of art therapy.



Sharp Edges, Artist Book, by Dr. Lynn Kapitan

#### LINKS:

Retrospective art exhibition and webinar:

https://mtmary.mediasite.com/Mediasite/Play/b55985988c2e44afa922ee75ca47a6d31d

Community art therapy video:

https://www.youtube.com/watch?v=WpV55B-zqzw

**Epilog: Letter to Future Art Therapists:** 

Lynn Kapitan - 9789004368262 Downloaded from Brill.com04

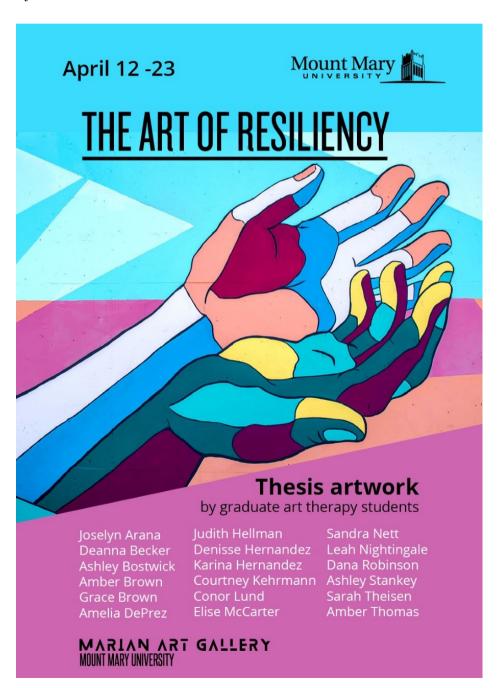
Thank you Dr. Kapitan for the contributions, insights, and discoveries you have created at Mount Mary University and within the field of Art Therapy. Your dedication and accomplishments will not go unnoticed and will live on, inspiring future art therapists to make their mark and further advance the field.

# GRADUATE ART THERAPY SENIOR EXHIBITION

#### **Senior Exhibition**

Class of 2021

by Rachael Wuensch and Katherine Kaliban



The Graduate Art Therapy Department would like to acknowledge and congratulate the class of 2021 for their hard work and dedication over the past three years.

The Mount Mary Community is looking forward to see where your art therapy career takes you.

Again, congratulations and good luck with all your future endeavors!

If you are interested in viewing the virtual senior exhibition, please refer to the link below.

#### Youtube:

https://www.youtube.com/watch?v=lFl-6F6XxMg