An Intersectional Framework for Race, Class, Gender, and Sexuality in Art Therapy

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Abstract

This article calls for an examination of identity and difference from a sociocultural perspective in art therapy theory and practice. Identity markers such as race, class, gender, and sexuality have tended to be seen in isolation and in ways that hamper the ability to understand and theorize difference. In constructing knowledge and in advancing more effective practices, art therapists need to examine identity and difference not only from a psychological perspective, but also from social and cultural ones. An intersectional framework that demands self-reflexivity is presented as important to research, scholarship, organizational policy making, and theorizing that shapes art therapy practice.

Introduction

As I look back on my experiences in the mental health field, my doubts concerning psychological theory—primarily, its insensitivity to social and cultural forces—emerged from a need to understand my own cultural encounters and hybridity. In the field of art therapy the dominant perspective on human relationships is largely derived from male, Eurocentric teaching, which has shaped in turn theories of human development derived from psychology and psychopathology (Burt, 1997; Espin & Gawelek 1992; Talwar, 2002; Zinn & Thorton-Dill, 1996). I write out of concern for articulating the construction of my reality: that of a person born and raised in a “third world” country, living in a “first world” country, and trying to shape an identity that gives meaning to my encounters with class, race, and gender inequality. From my experience in the field of art therapy, I have found that issues of difference, power, and authority mostly go unacknowledged. As an educator, I am frustrated when research methodologies and scholarship ignore issues of identity and difference, and when positivist notions of human development follow narrow lines of thinking, outside of which nonconformist behaviors and identities are relegated to pathology.

In this article I propose that as art therapists we must direct our attention to cultural variability in terms of race, class, gender, and sexuality in order to include subjectivities that do not easily fit within the universalist paradigm of human development. As an academic discipline, behavioral psychology has promoted reductive conceptions of human nature. Difference and cultural diversity, when acknowledged at all, are reduced to the normal-versus-abnormal binary view of pathology. Simplistic analyses of cultural diversity camouflage oppressive power structures and neutralize differences, and do so without recognizing any need to alter the existing social context (Espin & Gawelek, 1992). Likewise, art therapy has absorbed human development frameworks in which characteristics of visual expression become markers of development, and it has done so largely without examining the role of cultural and social factors. Fully understanding how marginalized individuals have been affected by social, cultural, and political forces means bringing issues of inequality and difference not only into the discussion of human growth and development, but also into our theoretical and scholarly work.

Art therapy scholarship has explored issues of difference from the perspective of race, ethnicity, gender, and sexuality, but it has done so mainly by viewing each as an isolated dimension of culture rather than as intersecting principles that shape experiences. Class issues largely have been overlooked, with the result that middle-class cultural practices are accepted as normative and transposed onto minority populations—the majority of clientele for many art therapists. For example, Lareau (2003) highlighted the important role played by class in child-rearing practices in her ethnographic research. She found that the U.S. philosophy of child rearing typically centers on individual responsibility in determining life’s outcomes and in fulfilling the ideals of the “American Dream,” both of which benefit middle-class families. She exposed profound differences in the quality of social services received by children of the middle class as compared to children in poor and working-class families. Her study emphasized how institutional, power, and authority mostly go unacknowledged. As an educator, I am frustrated when research methodologies and scholarship ignore issues of identity and difference, and when positivist notions of human development follow narrow lines of thinking, outside of which nonconformist behaviors and identities are relegated to pathology.

In this article I propose that as art therapists we must direct our attention to cultural variability in terms of race,
social science research (Collins, 1990; Zinn & Thorton-Dill, 1996). These scholars put forth an intersectional model that accounts for race, ethnicity, class, gender, and sexuality on issues of inequality. An intersectional analysis “begins with the experiences of groups that occupy multiple social locations and finds approaches and ideas that focus on the complexity rather than the singularity of human experience” (Thorton-Dill & Zambrana, 2009, p. 2). One of the core principles of intersectionality is self-reflexivity, especially in research and scholarship, when confronting the experiences of the Other. For example, the scholar deliberately makes explicit his or her role, motivations for undertaking the research, and the dimensions of power and privileges that may be enjoyed on the basis of race, class, gender, and sexuality.

Much recent scholarship in art therapy has been driven by a need to articulate and clarify our own identities and differences as art therapists. In 2007, Vick edited a special issue in this journal that focused on the experiences of men in art therapy. Hoshino and Junge in 2006 collected a series of life stories by art therapists of color. Earlier, several authors addressed feminist approaches in art therapy (Burt, 1997; Hogan, 1997; Joyce, 1997; Moon, 2000; Talbot-Green, 1989; Talwar, 2002; Wadeson, 1989). Although art therapists have stressed the importance of identity markers when investigating themselves or the Other in therapeutic relationships, they have paid little attention to the privileged role of therapists or how their positions within society at large have shaped the organizational policies of the profession, such as those of the American Art Therapy Association (AATA). I assert that art therapists need to situate research and scholarship related to identity and difference within larger historical and social contexts—beyond, in other words, the monolithic or unitary narrative of art therapy. We must consider how we present and represent the lives and stories of others. Madison (2005), a critical ethnographer, invites researchers to consider such questions as follows:

1. How do we reflect upon and evaluate our own purpose, intentions, and frames of analysis as researchers?
2. How do we predict consequences or evaluate our own potential to do harm?
3. How do we create and maintain a dialogue of collaboration in our research projects between ourselves and Others? (p. 4)

This article proposes a repositioning of art therapy theory and practice within larger cultural and social arenas. In particular I urge scholars to identify their privileged positions on the basis of race, class, gender, and sexuality when representing and defining identities and experiences that lie outside the norms of the dominant culture.

Theorizing Difference

To understand the basis upon which difference is determined one can look at the history of discrimination based on race, class, gender, and sexuality in the United States. The social movements of the 1960s (civil rights, feminism, identity politics) contributed fundamentally to the breakdown of the notion of the “American mind” as a homogenous entity that assumed a fixed set of qualities: hopeful, innocent, individualistic, pragmatic, and idealistic (Kuklick, 1972). As scholarship in the humanities and social sciences increasingly turned interdisciplinary, concepts and methodologies have crossed fields; works that shaped the understanding of race and ethnicity also have influenced studies of gender and sexuality. The result has challenged what was once a monolithic view of “American-ness” and definitions of normality. With the rise of ethnic, women’s, and queer studies programs in higher education, scholars have increasingly paid attention to formerly marginalized subjects. Methods of inquiry have reshaped scholarship and led to a better understanding of identity and difference. One result is that the cultural construction (and deconstruction) of the categories of analysis—including race, ethnicity, class, gender, sexuality, and the body—has become further complicated. My own therapeutic practice and research have been enriched by engagement with the cultural and social dimensions of subjectivity using an intersectional approach.

The critically reflexive practices of intersectionality primarily arose from women of color and lesbian scholars who critiqued feminist scholarship for its “unstated and unproblematized White, middle-class, Eurocentric and heterosexual bent” (Weber, 2001, p. xiv). Such scholars take issue with “unitary theories of gender,” offering instead a new conceptual framework that goes beyond the “mere recognition of diversity and difference to examine the structures of domination, specifically the importance of race in understanding construction of gender” (Zinn & Thorton-Dill, 1996, p. 321). The result of work informed by poststructuralism, postmodernism, critical race theory, queer theory, cultural theory, and feminism has been the rejection of universal and essentialist modes of analysis. This means that qualities that once underpinned binary constructions of gender (women/men), race (Black/White), and sexuality (heterosexual/homosexual), or that advocated for a classless society (equal opportunity as synonymous with the “American Dream”), become intersectional markers of identity rather than singular, essential categories that define individuals. Instead of inherent characteristics, race, class, gender, and sexuality are organizing principles of a society that position members of various groups within its opportunity structure. By moving away from essentialist categories issues of difference are transformed because there is no “universal truth” that needs uncovering.

An Intersectional Framework: Implications for Art Therapy

Caughey (2006), an anthropologist and American studies scholar, noted that studies of culture tend to be oriented toward groups and societies rather than toward individuals. His argument destabilizes the concept of culture as a uniform or singular entity. Instead, he emphasized that each individual forms part of multiple “cultural traditions” as he or she creates and negotiates identity on an everyday
Knowledge Construction

Knowledge is always situated within its historical and geographical contexts. Weber (2001) argued that any analysis of race, class, gender, and sexuality needs to be located within a specific time and place to avoid universalizing its meaning. Because art therapists engage in social and cultural dimensions that affect practice, it is important to articulate our own social positions and standpoints. Burt’s (1996) critique is an example of taking a postmodern, feminist stance in challenging art therapy scholarship and research. She observed how “meaning and knowledge are constructed with a focus on who is asking the question about whom” (p. 13). Knowledge and power are inherently linked. Highlighting the relationship between power, knowledge, and discourse, Foucault (1977) theorized that power is based on knowledge and power reproduces knowledge in shaping subjectivity.

Of particular concern to art therapy is the role of “multiculturalism” with respect to how social and cultural constructs engage the understanding of subjectivity. Questioning the framework of multiculturalism, Moodley (2007) wrote that psychotherapy has tended to focus narrowly on the concept of cultural identity as something that relates only to non-European ethnicities. For a deeper understanding of cultural identity, we need to look at identity as multifarious, as well as engage with the “politics of identity” in the construction of subjectivity. Art therapy educators, researchers, and therapists must move beyond the notions of marginalized and fixed ethnic and racial “Black/White” paradigms of practice and include White people as an essential part of multiculturalism. At the same time we need to become inclusive of the gender and sexual orientations of gay, lesbian, bisexual, transgender, and queer populations and of variations in class, disability, age, and religion.

Within this context it is also important to look at the organizational cultural dimensions of art therapy professional organizations such as AATA to highlight the dominant forces that have shaped knowledge construction and frameworks that guide scholarship, research, and practice. As art therapists we need to raise questions: What ideas and assumptions underlie our theoretical frameworks? What kinds of critical practice does art therapy enable and what perspectives does it ignore?

Biological Forces and Inherent Inferiority

Several foundational concepts in art therapy practice can be traced to historic scientific theories of biological determinism, genetic inferiority, and the perspective of cultural deficiency (Hartling & Sparks, 2008). Race, class, gender, and sexuality are social constructs (Weber, 2001). To have a deeper understanding of how images have shaped and constructed social categories, and have contributed to the legacy of colonialism, it is valuable to study the history of criminology and ethnography that led to the eugenics movement in the early 20th century. Employed as a system of profiling and measuring moral degeneracy, photography was used to categorize criminality according to the outward physical features of race, gender, and ethnicity. Photographs were thought to provide material evidence to justify scientific objectivity and the civilizing mission of colonial imperialism. Photography made transparent the racial, gendered, and sexual body; as a readable and categorizing text, it reinforced and served the ideology of middle-class norms, especially with respect to deviance and the perversive body (Sekula, 1986).

Identity markers can have biological and material referents, but they are not fixed; their meaning does and will change over time and in different locations (Weber, 2001). To investigate how race, class, gender, and sexuality as cultural constructs have conspired to shape subjectivity, art therapists need to examine the role of oppression, the impact of popular culture and visual media in controlling how minority populations have been viewed. This means that we must question theoretical frameworks as well as therapeutic practices that control and fix racial and sexual identities in ways that are negative, degrading, and demoralizing (Hartling & Sparks, 2008). Art therapists have emphasized clients’ visual expressions rather than the role of the greater visual culture in shaping clients’ perspectives and creating internalized oppression. Likewise, we need to question the viewing practices that art therapy has promoted by following the norms of psychopathology. How has art therapy reinforced ideas of normalcy by privileging images of heterosexuality, for example, or promoting images as a homogenizing force of identity? What are the racial, gender, and class norms that art therapy has privileged?

In a recent article, Gussak (2008) explored gender from the perspective of “being a man in a predominantly...
women’s field” (p. 64). He critiqued feminist approaches to art therapy, correctly pointing to the erroneous belief that “nurturing and creativity” (p. 69) are strictly feminine traits, but incorrectly characterizing art therapy as a profession that has largely been informed by feminist discourse. Gussak’s critiques of Burt (1996) and Moon (2000) as promoting “feminine stereotypes” are misleading. First, simply because AATA has a majority female membership does not mean that it is a feminist organization or is influenced by feminist theory. Second, contemporary feminist scholarship tends to focus on theorizing difference—that is, on exploring racial and ethnic perspectives along with issues of gender, class, and sexuality among minority subjects. Feminist theory has been effectively employed and complicated by male, female, women of color, gay, lesbian, and queer scholars. The enormous influence of this scholarship has opened avenues to address marginalization throughout diverse societies.

Gussak’s (2008) perspective on gender endorses a binary construction of gender that social constructionists seek to complicate on the basis of sexuality. Contextualizing gender without examining sexuality promotes a heteronormative view. Accounting for the role of gender politics, Pelton-Sweet and Sherry (2008) wrote an important commentary on the coming out process of lesbian, gay, bisexual, and transgender clients, which complicates the role of gender and sexuality as viewed in art therapy treatment. Drawing from the tenets of queer theory, they called on art therapists to consider nonnormative sexual and gender identities in order to better understand the representation of marginalized subjectivities. Critiquing the linear nature of stage theories of the coming out process, for example, they asked art therapists to consider factors of race, ethnicity, and age that are involved in self-identifying sexual identity. Pelton-Sweet and Sherry recommended increased self-reflexivity, urging professional organizations to develop guidelines for art therapists working with these populations.

Addressing Inequality

The most important factor in any art therapy setting is the recognition of inequality as it relates to power dynamics that may operate between the client and art therapist on the basis of race, class, gender, sexuality, education, and citizenship. Hocoy (2002) raised pertinent issues regarding race and the unconscious framework with art-based methodologies.acknowledging the cultural power dynamic that puts the client in a subordinate position—and take into account the social, cultural, or political significance of the image. Another key factor is the role of visual culture in which a model of inherent inferiority has been used to represent minority groups, as mentioned earlier. Although art therapists advocate for a pluralistic world where everyone can make images, we have only begun to critically examine media, popular culture, and advertising propaganda and how they further middle-class values and ideology. As Weber (2001) observed, race, class, gender, and sexuality are constructed within relationships of dominance and subordination. Therefore it is important for art therapists to consider and evaluate the effectiveness of the theoretical frameworks commonly employed in scholarship and clinical work. Are evaluative or therapeutic art therapy methods effective with poor and working-class clients, for example, or do our methods marginalize them further?

Drawing on the commonality of visual characteristics as they relate to the individual’s psychological development, some believe art therapy can be an objective means for accessing the unconscious layers of the mind. In this view, the unconscious is privileged at the cost of the cultural dimensions and everyday experiences of the individual; because the unconscious is by definition “closed” to the client, the power differential between client and therapist becomes key to their relationship. If social and cultural theory is moved from the periphery to the center of art therapy practice, it would mean taking into consideration the economic conditions that have historically contributed to the marginalization of poor, working class, and immigrant clients. In this way art therapists can begin to explore the political processes that have acted to shape the current situation of our clients.

Macro-Social-Structural and Micro-Social-Psychological Levels

Systems therapists have long emphasized the relationship between macro and micro structures to locate how families and individuals function within social environments. The relationship between macro social structures (such as societies, cultures, and institutions) and micro-psychological levels can be examined from at least two perspectives in art therapy. First, it is important to consider the role of AATA as a professional organization in developing educational standards for art therapists. Although research may focus on the experiences of minority clients as related to childhood abuse, trauma, and psychological disorders, there has been little examination of the impact of systemic oppression and treatment that ameliorates the psychological affects of oppressive cultural practices on a client’s life. Western psychological theory has consistently placed responsibility on the individual rather than the social context in assessing the client’s treatment and prognosis (Hartling & Sparks, 2008). To understand the construction of social reality for individuals it is important to link personal experience with sociocultural interactions.

Second, it is equally important to revisit the role of power dynamics between the therapist and client. What is the impact of the race, class, gender, and sexuality of the therapist on the therapeutic relationship with a minority client? (Campbell & Gaga, 1997). The history of racism in the United States, for example, should be examined beyond simple prejudice. Tatum (1997) differentiated between race and racism in that race relates to the biologi-
reflexive practices also need to be part of quantitative research. Reflexivity implies that all researchers—whether using qualitative or quantitative methodology—will be “shaped by their social-historical locations, including the values and interests that these locations confer upon them” (Hammersley & Atkinson, 1983, p. 16). Caughey (2006), in his description of life history research methods, directs researchers to pay close attention to the “breakdowns and rich points” (p. 56), letting the research direct the questions we ask rather than impose preconceived notions. “Breakdowns” refer to the moments when the researcher’s ideas and assumptions come into conflict with his or her findings. “Rich points” are revealed in the process; they are the surprises that offer new and unanticipated ways of thinking and theorizing. Reflexivity allows the researcher to explore his or her assumptions and how they affect or impinge upon the work. An intersectional approach to research seeks to represent the “meanings of meanings” to broader structures of social power and control” (Thomas, 1993, p. 6). This requires challenging the arbitrary nature of cultural images and signs and their codes. Such a critique confronts the centrality of cultural representation of marginalized individuals and how they are culturally produced.

**Intersectionality**

Applying an intersectional framework, according to Weber (2001), means considering issues of race, class, gender, and sexuality as they are simultaneously expressed. As argued above, the systems comprising a social hierarchy are interconnected and embedded in a society’s institutions. As individuals, we each experience our lives through culturally defined categories; through them we may occupy positions of dominance or subordination, and sometimes both simultaneously. Thus, identity is not a fixed category, but rather a complex set of intersections that shift and change.

The special journal issue on men in art therapy (edited by Vick, 2007) is notable for its varied approaches to the subject; authors raised questions from clinical, self-reflective, and cultural perspectives. Each article was written without any attempt at distilling some universal experience of masculinity. Contributors to the issue were diverse, including three White male educators, two non-White male art therapists, and one woman. The goal of the issue was to highlight men as a minority population in art therapy. Although demonstrably true within that narrow context, men have been and still are privileged on the basis of race, class, gender, and education. I believe that as art therapists we need to rethink the meaning of “multiculturalism” and “diversity” for men, women, people of color, gay men, lesbians, and queer persons alike. The lack of men entering the field of mental health remains a concern for counseling and social work as well. A study by Koese and Krowinski (2004) revealed that the shortage has been to the advantage of men, to whom employment preference is frequently given over women. The authors also found that men are consistently paid more than their female counterparts. To understand the complexity of identity as it relates to an intersectional approach, we need to consider the consequences of taking into account only a single dimension...
of oppression or one cultural dimension (e.g., gender or race) while ignoring the others.

**Conclusion**

Intersectionality, which demands self-reflexivity, fortunately has a precedent in the discourse on countertransfer-ence that has been central in understanding the subjective responses of art therapists in guiding treatment. Excellent literature has deepened an understanding of personal biases and their impact on the therapeutic relationship (see Agell et al., 1981; Klorer, 1993). Because countertransfer-ence mainly has been viewed as a matter of the therapist’s unresolved intrapsychic conflicts, it would be beneficial to consider it from a sociocultural framework as well. Such a stance allows for a deeper analysis when contextualizing the art therapist’s cultural beliefs, values, and social position.

In a quantitative research study, Deaver (2009) offered an excellent example of an intersectional analysis used to examine normative children’s drawings, looking at “difference” from the lens of race, ethnicity, and gender. Adopting an intersectional perspective means locating individual differences within the specific social and cultural experiences of individuals, rather than within a linear, unifying theory of human growth and development.

Finally, as art therapists engage with the realities of subjectivity and representation in art therapy, we need to consider the “performative, pedagogical and political” (Denzin, 2006, p. 333) aspects of our scholarship, research, teaching, and practices. We need to be aware of how, through our writings, we enact the world that we live in (Denzin, 2006). For current and future generations of art therapists to advance theories and practices that address the diverse challenges of the therapeutic enterprise, we must become more skilled in confronting, challenging, and contesting hegemonic ways of seeing and representing others. The historic binaries of art therapy practice have only reinforced the reductive paradigm of normal versus abnormal. Getting beyond such practice means engaging in a discussion of cultural diversity from an intersectional perspective. Intersectionality as it is integrated into our discourse will offer art therapists a means to identify and deal with cultural complexity and issues of power from personal, national, and global perspectives.

**References**


