

Studios as Locations of Possibility: Remembering a History

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Abstract

This paper considers the studio in art therapy as a neglected yet key aspect of the field's history. Descriptions of studio art practice among the founders of the American Art Therapy Association and such predecessors as Mary Huntoon were obtained through historical research. Because both art therapy and art studios are hybrid in nature, the author proposes that ideas from fields outside of art therapy be utilized for the rich intersections of knowledge and wisdom they may bring to art therapy studio practice. Studios in the history of art therapy are discussed as providing a locus of intersections and thus of possibility.

Remembering and Histories

As cyclical phenomena, histories can contribute to contemporary understandings but only when they are remembered. Remembering itself, of course, can be problematic because of the tendency to recall events as they were last told or last heard rather than as they may actually have taken place. The history of art therapy in the United States has been subsumed by the more particular history of the American Art Therapy Association (AATA), due to the fact that the latter is a history that was documented in correspondence among association founders and through official meeting minutes stored in the AATA archives. In addition, AATA's history as recounted by Junge (1994) has tended to be considered the definitive history of art therapy despite the fact that it is titled "a history," which suggests that there may be others. This official history has become what Bakhtin (1935/1981) called "authoritative discourse," or in this case, authoritative history, "located in a distanced zone, organically connected with a past that is felt to be hierarchically higher" than an authority "already acknowledged in the past" (p. 342). Although it documents the founding of an association, such authoritative history leaves out another history—that of art therapy's more aesthetic, art-centered past in which the experience of making art was central. This untold story has to do with an "internally persuasive" discourse (Bakhtin, 1935/1981) that engages us by appealing to the heart and felt senses, working from the inside out rather than being officially prescribed.

Nietzsche's insights on historical imagination in art can be applied to art therapy in this case: We imagine art histo-

ry in terms of old, long familiar subjects and characters, in "ever enduring reanimation and reformation" by which the artist's work "becomes the image of what *endures eternally*" (as cited in McNiff, 1989, p. 73). As a hybrid with rich multidisciplinary roots, the relatively youthful field of art therapy likewise holds many old, familiar, and enduring aspects in its historical imagination. A neglected but key one of these is the art studio. Although studios are addressed in contemporary art therapy practice and writing, their historical role in the field mostly has been overlooked.

Gioux (1987) wrote that "critical literacy suggests using history as a form of liberating memory" (p. 16). The liberation of remembrance and historical imagination seem related to that which has been neglected in art therapy's written history. Without its aesthetic history, the discipline lacks certain essential moorings. To liberate remembrance, the enduring images of a deeper and more aesthetic history must be part of our historical imagination.

Looking Back

I began my own exploration into art therapy's history a full decade ago. My search was and continues to be into art therapy's artistic roots. To begin this historical research, I spent a week in the archives of the American Art Therapy Association at Emporia State University in Emporia, Kansas. Soon after my days in the AATA archives, I visited the Spencer Research Library in Lawrence, Kansas, where I perused the Mary Huntoon archives that documented her pioneering art therapy work at the Menninger Clinic. The contrast between the two collections was startling. Although the AATA archives include some fascinating artifacts related to Florence Cane's 1953 book, *The Artist in Each of Us*, and her Rockefeller Center art school, the collection primarily consists of correspondence and meeting records from the earliest days of the organization. It is interesting to read about the struggles and joys of the founders as they joined forces to form AATA in the late 1960s. What gets lost in that shuffle, though, is the heart of both their art and their art therapy practices.

As I made my way through the Huntoon files during this visit and a longer one 3 years later, there was indeed correspondence as well as hand-written notes and lectures; there even were published articles pertaining to Huntoon's mid-twentieth-century work with patients at the Winter Veterans Administration Hospital in Topeka, Kansas (Wix, 2000). Huntoon's papers document not only her dedication to providing art therapy at the hospital but they also track

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her journey as an artist, telling the story of one person's dedication to art and its abilities to communicate and to serve. I found here the difference between an organization's official history and the records of a life lived—in this instance the life of someone who worked as an artist and art therapist outside the formalities of a professional association. Since then I've come to see that Huntton's is only one of many lives reflecting an internally persuasive history.

Such a subjective narrative needs to be integrated with the association's story to create a history that more fully and accurately describes the field through an understanding of the lives and practices of those within it. Therefore, I determined to use interviews as an attempt to get beyond the formal correspondence and into the artistic experiences of the founders. Through the summer and fall of 1999 I interviewed four of the five founders of AATA then still living, as well as art therapy pioneer Edith Kramer. I wanted to learn from the association's founders about the role of art in their becoming art therapists, and I sought to elucidate the artistic roots of a profession that seemed not to have paid much attention to this fundamental element.

The Interviews

In the summer of 1999, I met with AATA founder Robert E. (Bob) Ault at the Ault Academy of Art, an art teaching and art therapy studio that he started in Topeka, Kansas, in 1978. Bob began our interview by lauding his colleague Don Jones and the strengths of the programming at the Menninger Clinic, where both men had worked as art therapists through the 1960s and where they set up the Creative Arts Clinic. Bob said that art therapy at Menninger "didn't get into the analytic kinds of interpretive stuff. We really taught the patients how to paint and use art" (R. Ault, personal communication, July 1, 1999). Bob loved talking about the history of art therapy in the United States. As a founder he knew AATA's early history intimately and was responsible for the archiving of the organization's materials. A favorite story of his involved his surprise at learning that "Art Therapy was something else"—something different from what he was doing as an art therapist at the Menninger Clinic—that it was instead "art analysis done by a handful of women on the east coast and it was spelled with a capital A. T." (as cited in Wix, 2000, p. 169). His recollection was that his cofounders Myra Levick and Felice Cohen were more psychoanalytically oriented, that Elinor Ulman had educational leanings, and that he and Don Jones were "much more art oriented."

In September of the same year, I visited Felice Cohen in Houston, Texas. Felice told me that as early as 1959 she had described her work with children by saying "I'm using art with my therapy" (F. Cohen, personal communication, September 15, 1999). As we talked, she showed me the works made by friends, family members, and colleagues that filled her house. She commented that she had given away most of her own art. Of herself as an artist, she said, "I was what I'd call a 'Sunday artist.' I had no formal training...but I enjoyed painting." She said her own "enjoyment of using art itself" inspired her as an art therapist and added, "it just

sort of pushed me in that direction." She summarized the AATA founders this way:

Bob Ault speaks of art as the primary thing for the practice of art therapy. So does Don. I think Myra and I...refer to us as art psychotherapists. ...It's just a way of looking at it. I think we all know that art is an integral part of art therapy. We all also know that therapy is an integral part of art. It's a way of expressing ourselves. (F. Cohen, personal communication, September 15, 1999)

The next day, when I arrived at the Levick home in Boca Raton, Florida, Myra Levick gave me a tour, pointing out her paintings and a wall covered with collages of family pictures. Once we settled down to talk, she showed me more of her own paintings as well as works made by some of her child clients. Myra told me that she entered the field in 1963 when, having raised her family, she responded to an advertisement for an artist to work in a hospital in Philadelphia (Wix, 2000). The head of the unit, a psychiatrist, said he would teach Myra psychiatry if she brought her art skills to the unit. After 3 years at the hospital, she began graduate study in psychology. Regarding the founding of AATA, she said, "We all came in as artists, and then moved forward with psychological orientation" (M. Levick, personal communication, September 16, 1999).

A few days later, I visited Don Jones at his home studio in Columbus, Ohio. As he showed me his current artwork, he remembered back almost 50 years and expressed his conviction that art therapists must make art. Don asserted, "If you don't have art in your schedule, then you need to change your schedule" (D. Jones, personal communication, September 22, 1999).

He went on to tell me that when the Menninger Clinic hired him in 1951, it was as an artist to serve as an adjunct therapist. Don had 4 years of experience in the "back ward of a state hospital" as a conscientious objector during World War II. "I was doing art and psychiatry. Before the art therapy association ever came about I had 12 years of doing this so it was easy for me to leap...into being an art therapist at Menninger's." Don attributed his ability to "work heartfully" to his own sense of wonder and to his mentors, Drs. Karl and Will Menninger.

I next visited Edith Kramer at her Van Damme Street studio in New York. Although not an AATA founder per se, Kramer was active prior to and during the association's earliest days. She wasted no time telling me that art therapists forget "what they can do best, which is work with art materials" when they try to become "baby psychoanalysts...which you can never do as well as the one [who is] really trained to do it" (E. Kramer, personal communication, September 23, 1999). When asked about art therapy education, she fervently responded that it should provide "More art. More art. More art. Studio work. Sculpture. More. Give students more possibility to have their own art and learn to use art materials therapeutically." She added, "You need an awful lot of information also. It's not easy."

In the interviews, all founders referred to themselves as artists and discussed one another's artistic leanings during

the formation of the association. All were passionate about their own art. Still, there was reference to moving forward from art to psychology, which suggested that the art in art therapy was something to be left behind in growing up and in growing the field. Kramer was adamant about the art in art therapy and art therapy education. With surviving founders claiming art as instrumental in their roles as art therapists, what is the failure to remember the art in art therapy's history?

A Studio in Art Therapy's History

Prior to visiting the Huntoon archives, I hadn't anticipated "meeting" Mary Huntoon through the artifacts of her life. In examining the boxes full of remnants, however, I came to know her in many ways. Her approach to her work at the Winter Veterans Administration Hospital (WVAH), documented in typewritten notes for presentations to doctors and staff about ways to use art in treatment, felt familiar to me. These notes inspired me to learn more about early art therapists whose practices were driven by their work as artists. Huntoon's life—from her early art education in Topeka, to her study at the Art Student League in New York, NY, her years as an artist in Paris, and her 12 years at the WVAH in Topeka—tells a piece of art therapy's history that is missing from the official, authoritative one (Wix, 2000). Delving into the official documents and the more private memorabilia that fill the boxes marked "Huntoon" in the Kansas Collection in Lawrence taught me that art practitioners were thinking about forming an organization almost 20 years before AATA came into being and led me to look further into internally persuasive and enduring connections that exist in the field's history.

Among the papers in the Huntoon boxes is a 1953 letter from Mr. Wayne Nowack, who was identified as "Head, Art Therapy Department, Mental Health Institute, Independence, Iowa." He wrote to Mary Huntoon "in the interest of a get-together-movement in the field of Art therapy." Nowack spoke of the isolation of art therapists and said that he had already been in touch with art therapists in Washington, DC and Los Angeles about forming a national organization with the goals to:

implement the expansion and increased use of art therapy, but also set up standards for the education of art therapists, provide a meeting ground of ideas for more effective operation, and secure the foundation of art as a valuable curative procedure or aide in the broad area of psychiatric therapy. (Nowack, 1953)

Nowack (1953) advocated a separation of art therapy from occupational therapy, which was established in medical and psychiatric hospitals at the time. He wrote, "art is something far more significant than just another craft activity... its aims and techniques, its *modus operandi* in the area of emotional re-education, are different enough in basic concepts from those of [occupational therapy] to justify a separate approach" (Nowack, 1953). He noted the isolation of those practicing as art therapists and the need for practitioners to become acquainted, writing that

"*union*, to help all of us work better and to do more through art" might bring more recognition of art therapy as a professional discipline.

In a 1950 letter sent to Huntoon from Huntington Park, California, Oletha E. Fowler inquired about "a National Organization of Art Therapists [that] could carry certain standards and educational requirements." Fowler wondered if Huntoon had "done some thinking along these lines" (Fowler, 1950). Other letters dating from 1947–1953 inquire into the nature of the art therapy program at WVAH in Topeka. The archived letters indicate a growing interest in forming an organization as early as the 1950s, nearly 20 years prior to the formation of AATA. The letters also show that Huntoon's work at WVAH was known across the country.

Harriet Smith, a student at the Menninger School of Psychiatry in Topeka, Kansas from 1949–1950, wrote about Mary Huntoon and the art therapy/manual rehabilitation program at WVAH. Her account highlights the richness of the environment in the "art shop":

The art studio at Winter VA Hospital looks just like art classrooms the world over. It smells of paint, it has a number of easels scattered about in no apparent plan of arrangement, and it is charmingly cluttered with a variety of oddly assorted objects ranging from drapery lengths to old bottles. (Smith, ca. 1950, p. 15)

Smith (ca. 1950) described students working at easels in deep concentration and the different ways in which they painted—some quickly and surely, others gazing for long periods of time. She noted how the teacher/therapist checked in with each of the students and recounted students finger painting, carving plaster, and rubbing ink into etching plates. She described the women as wearing skirts and blouses and the men in maroon-colored gabardine outfits that looked like uniforms, pointing out that the artists were patients in the hospital (Figure 1). Smith went on to differentiate the studio processes she observed from assigned occupational therapy projects, which were "intended to keep [the patient's] hands occupied and to provide an outlet for his feelings" (Smith, ca. 1950, p. 15). Distinguishing between occupational therapy and art therapy (Figure 2), Smith noted that as an artist, Huntoon emphasized creativity: This "emphasis is possible at Winter because the supervisor of creative arts, Miss Mary Huntoon, above all is an artist herself. ... The artist-teacher [stimulates] the student-patient to create, using intuition as a guide" (ca. 1950, p. 16; see also Wix, 2000, p. 172). Both Huntoon and Edward Adamson (1984), a hospital artist in England during the middle part of the century, considered themselves "catalysts" in their hospital roles. Adamson wrote that the "hospital artist's main role is to be a catalyst who allows the healing art to emerge" (1984, p. 4).

Since the early 1990s, many authors have addressed studio perspectives in art therapy (Allen, 1992, 1995; Henley, 1995; McGraw, 1995; McNiff, 1995; B. Moon, 1990; C. Moon, 2002; Timm-Bottos, 1995; Wix, 1995, 1996). Allen's (1992) discussion of the "clinification" of art

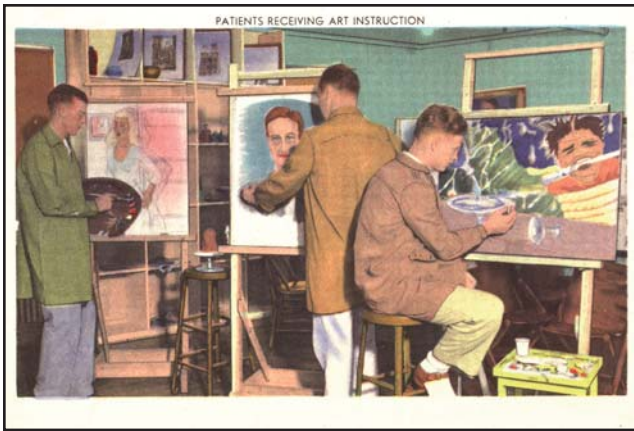


Figure 1 Male Patients in the Art Shop

therapy opened the door for writings on contemporary studio perspectives that began to reclaim something known but lost. Although these writings have helped shift art from the margins to the center in contemporary art therapy, none of the authors other than McGraw (1995) discussed art therapy's artistic history. The omission reinforces the tendency to rely on the authoritative history constructed around the 1969 founding of AATA. To limit the beginnings of the art therapy field to a U.S. east coast psychological phenomenon is to render art therapy's history embarrassingly shallow and narrow. There remain rich and unrecognized histories waiting to be remembered and incorporated into the field's written history.

Hybridity and Intersections

Perhaps what I see as a failure to remember has to do with the neglect of the hybrid nature of art therapy in a dominant culture that advocates for clear-cut categories even in a post-structuralist era. In the United States mental health care system, art therapy services favor psychological relationships over art-based approaches that art therapists know better than other mental health professionals. My own experience inclines me to think of studios as places where diverse ideas and disciplines intersect, offering opportunities to see meeting points as rich ground of possibility in art therapy thought and practice. At junctures common in studios, various factors—from access to and handling of materials to relationships with other makers and their artworks—meet and mingle to create opportunities for clients and patients to gain insight and to reconceive themselves and their realities holistically through making visual images. Writers from outside the field of art therapy have discussed the value of intersections among and within various disciplines.

In his studies of the art of cultures throughout the world, Bateson (1972) discussed relationships among and within fields of thought, writing that “ours is a world of circuit structures” and that “life depends upon interlocking circuits of contingency” (p. 146). Bateson's ideas on circuit structures and interlocking contingencies remind me of interconnections discovered within studios and how often

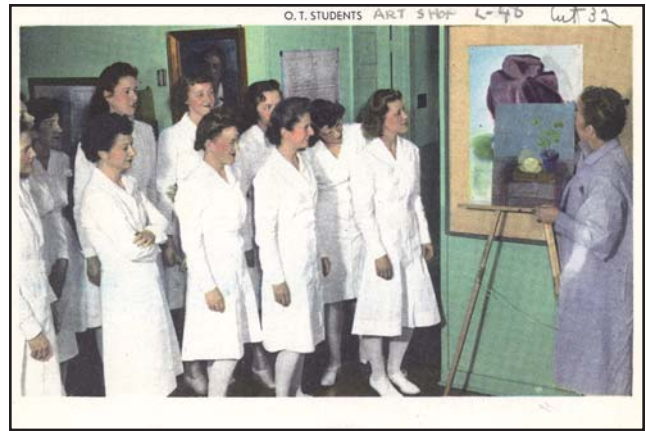


Figure 2 Huntoon With OT Students

the delightfully unexpected happens—such as the discovery of what an unfamiliar material will do or of a connection with someone else's art. Although materials and makers may embrace certainties within particular studios, the patterns and possibilities of connection are multiple and uncertain. As patterns form so do the “connective tissues” that link makers and their actions in the studio. These patterns that interconnect become like the interlocking circuits of contingency described by Bateson, linking his idea with the already hybrid nature of art therapy.

A quarter of a century after Bateson's work, Csikszentmihalyi (1996) explored ways that creativity thrives at intersections and emphasized that conditions for highly creative thoughts and actions tend to emerge at junctions where a domain (visual arts), a field (art therapy), and individuals (art therapists) come together. In art therapy studios, multiple intersecting relationships between makers and materials, among makers themselves, and between makers and products spark creative thinking.

Merleau-Ponty (1962) attributed the connectivity that becomes possible at points where new ideas meet to phenomenology, which he saw as “the sense which is revealed where the paths of my various experiences intersect, and also where my own and other people's intersect and engage each other like gears” (pp. vii-xxi). Ideas espoused by Bateson, Csikszentmihalyi, and Merleau-Ponty, all outsiders to art therapy, point to intersections or meeting places that can open up new dimensions of how we might understand patterns of connectivity, and thus possibility, in art therapy studios.

Bateson (1972) observed that art is a practice that maintains wisdom by “correcting a too purposive view of life” (p. 147), suggesting, it seems, that art has the potential to give voice to aspects in the psyche other than the ego. “Art is a part of [our] quest for grace,” Bateson wrote, “for the attainment of grace, the reasons of the heart must

Editor's Note: Figures 1 and 2 are used with permission of the Kansas Collection, Spencer Research Library, Lawrence, Kansas. Both are part of a series of 1950s color postcards depicting life at the Winter Veterans Administration Hospital in Topeka. The postcards indicate two aspects of the “art shop” directed by Mary Huntoon from 1946–1958.

be integrated with the reasons of the reason” (1972, p. 129). In his studies on art and culture, Bateson was concerned for what may be important psychic information in the art object quite apart from what it may “represent” (1972, p. 230). Similarly, French philosopher Henri Corbin (as cited in Sells, 1996) proposed that imaginal thought is capable of attending to what presents itself through perceiving, listening, and gazing. Art therapists tend to be adept at these three skills, their use of which potentially may reveal patterns of connection in artwork and in studio practices of art therapy.

The “circuit structures”—intersecting ideas from anthropology, creativity studies, and philosophy—that encounter each other in art therapy studio practices have the potential to enrich the field’s theory and practice both retrospectively and presently. As Bateson (1972) contemplated what is implicit in the style, materials, and composition in a work of art, so Carl Jung (1969) wrote, “Image and meaning are identical; and as the first takes shape, so the latter becomes clear. Actually the pattern needs no interpretation; it portrays its own meaning” (p. 402). In some art therapy approaches, however, the image gets lost in diagnostic and conceptual language that cannot hold its essence, substituting instead a verbal explanation of meaning that is not present in what the viewer sees. Understanding patterns and meanings other than those of symbolic representation involves more than intellectual knowing. Such insight requires knowing embedded in the heart, the hand, and the head. In honoring the artistic roots of art therapy it is important that what is pictured receive deep attention, which is a small price to pay for understanding.

In his book *Thought of the Heart* Hillman (1981) wrote, “My heart is my humanity, my courage to live, my strength and fierce passion” (p. 5). In art therapy studios, repeated acts of passion, courage, and humanity are often what lead makers deeper into their aesthetic processes. Berry (1982) brought the heart into learning by reminding readers of the repetitions required in committing something to memory. Her words can expand our thinking on repetitions and/or patterns that are common to the studio:

Repetition would seem a fairly important business....Have we some deep investment in our repetitions—some love for them? Is there a beauty there? To “learn by heart”—repetition goes to the heart, comes from the heart—is deep-seated....repetitions are strangely durable. (p. 118–119)

It is not hard to remember what we know by heart when we work in studios: the ways we engage the allure of materials or how, with practice, we know instinctively what materials do and how they work in their multiple ways of intersecting. We easily recall studio relationships with other people as well as how we worked, with what, and what was created. We remember also how others worked and what they made. Remembering seems easier somehow when it is based in repetitive, multisensory studio relationships. In fact, a part of the therapeutic value of the studio seems to lie in remembering. The remembering itself becomes a source of insight.

Concluding Thoughts

Studio practice is a contemporary trend in art therapy, as it well ought to be, because art therapy studios have been home to aesthetic and therapeutic activities for generations. Even so, studios in art therapy comprise a historical reality that has been neglected. Art therapy’s bias toward its psychological rather than its artistic roots has detracted from the stature of the field by ignoring the very nature of what art does and how healing as well as constructing self and knowledge occur in the process of making art. Studios have always made room for the heart’s longings and for aesthetic responses, for making that reflects and frees, for ways of knowing grounded in uses of materials and intersections among materials, making, and makers. These locations of fruitful interdependency invite the reason of the heart to integrate with the reason of the mind and to foster engagements with self, materials, and others.

As a hybrid field, I believe art therapy is at its strongest in places where art and therapy find each other and where the field makes room for its unacknowledged histories and links with other domains and fields. Historically, studios like the one in which Mary Huntoon practiced held potential for multiple relationships and uncertain outcomes that may have contributed to patterns of connection for their patients. In studios, makers and facilitators attend to images by perceiving, listening, and gazing. How images manifest within, around, and through art makers is paramount in settings where the unfolding of the image is understood through its own language.

Although there is undeniable richness in contemporary studio art therapy practices, I believe that the field’s inability to ground its studio practices in history has resulted in a theoretical and practical gap. Like their contemporary counterparts, historical art therapy studios made a place for patterns of connection through the ongoing emergence of relationships and repetitions. Goodman (1978) wrote, “Worldmaking as we know it always starts from worlds already on hand” (p. 6). If indeed we make worlds from what we already know, and if art therapists know art and its healing potential, then it is time to liberate the artistic history behind contemporary studio art therapy practices.

Art therapy’s studio history has gone unrecognized. Bringing it to light may potentially ground art therapy both in its own origins and in unexplored relationships with other disciplines. Bateson, Csikszentmihalyi, and Merleau-Ponty have written about the potential wisdom discovered at intersections. Corbin, Berry, and Hillman have insisted on remembering the imagination as an active practice. Goodman has reminded us that worldmaking is a remaking. All these contributing ideas relate to and enrich an artistic philosophy and grounding for art therapy, for when studios serve as locations of artistic and healing possibility, knowledge from the heart and from reason, as well as wisdom and grace, can be present in making images, selves, and worlds.

To return to the beginning of art therapy and its sources, there is a need to remedy a failure to remember, to liberate remembrance in art therapy in order to integrate its

artistic roots. Rich histories are complex histories; art therapy's rich history must be allowed its complexity. There is much to recover—a neglected side of the profession's official histories and the parts of ourselves that are lost when we don't remember the profession's past.

It is easy, I think, to see what has been neglected thriving in contemporary art therapy studios. The resurgence of studios in the past 20 years highlights the hunger for learning by heart about what is loved and longed for in art therapy studio practices and maybe even the larger field itself. This is not just about art therapy's connections to other psychological services but is also about multiple art-based intersections and interdependencies within the field of practice. When doctors at Topeka's WVAH prescribed art therapy to their patients, Mary Huntoon invited those patients into the studio to try out different materials and processes. She watched and waited while they found what worked for them in their own making and healing processes. Thus did she honor the presence of natural grace and wisdom in the studio. In doing so, she held the space for a possibility that has become the profession of art therapy.

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