Chapter 1 History of Art Therapy Training in Canada

Heather Dawson & Lois Woolf

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IN CANADA

Co-edited by
Marvin L. Simner and Gilda Grossman
Introduction

On behalf of the members of Canadian Art Therapy Association I am pleased to introduce this special topic issue of the Association's journal. The idea for this issue emerged during an historic meeting attended by representatives from all five of the major professional art therapy training programs in Canada. The purpose of the meeting, which was held at the Toronto Art Therapy Institute in October, 1994, was to establish an Educational Task Force under the auspices of the Association with a mandate to develop a set of guidelines for the professional training of Art Therapists in Canada. The Task Force was highly successful in carrying out this mandate and the resulting guidelines were approved by the Association's Executive in February, 1995.

To provide an appropriate context within which to publish these guidelines, and in keeping with the spirit of the Association's national identity, the Task Force felt that it was important to present the guidelines against the backdrop of the existing Canadian programs. It is for this reason that this issue begins with a brief history of the discipline in Canada followed by descriptions of each of the five Canadian art therapy programs and concludes with the Guidelines for the Professional Training of Art Therapists in Canada.

I wish to thank and acknowledge all of the contributors for making this special issue of the journal possible. In particular, I wish to thank Dr. Marvin L. Simner of the University of Western Ontario for his role in helping to develop the Guidelines and for his suggestion to produce this issue.

Heather Dawson
President
Canadian Art Therapy Association
The history of art therapy training in Canada would be incomplete without acknowledging the early contributions of Martin A. Fischer, Irene and Selwyn Dewdney and Marie Revai, each of whom worked with considerable dedication to promote their unique and innovative uses of art in the healing process. It goes without saying that we owe them a considerable debt of gratitude for their pioneering role in the development of our field.

The use of art therapy in Canada dates to the mid-1940s and early 50s, prior to the introduction of neuroleptic medication, when Dr. Fischer, the Dewdneys and Marie Revai worked with psychiatric patients. In 1944 Dr. Fischer (1914-1992) offered a very agitated patient an opportunity to express himself through art by providing the patient with pen and paper. He found over time that the unrestricted use of these materials had a very calming effect on the patient. This finding led Dr. Fischer to continue to explore the use of art not only with psychiatric patients, but with patients in his private practice as well as with children and adolescence in residential treatment. Dr. Fischer also encouraged his psychiatric residents to employ art with their patients in the hope that this form of therapy would gain wider acceptance in the mental health profession. Recognizing the usefulness of this approach to treatment, in 1967 he founded the Toronto Art Therapy Institute in order to train art therapists and thus to share with others his dedication to this unique form of treatment.

In the 1950s Irene Dewdney (b. 1914) and Selwyn Dewdney (1909-1979), both with a background in art and a strong interest in psychoanalysis, began their work in psychiatric settings. In 1952 Selwyn was appointed psychiatric art therapist at Westminster Hospital in London, Ontario, which was the first art therapy position to be established in Canada by the Federal Government. He was joined by his wife Irene in 1954. In 1972 Irene began work at the London Psychiatric Hospital, as well as at several other psychiatric settings. As she developed her techniques Irene also became interested in training students and it was this interest that eventually led to the formation of the art therapy program at the University of Western Ontario.

The author wishes to acknowledge the contributions of Julia Byers, Kay Collis, Irene Dewdney, Yvon Lamy, and Linda Nicholas whose knowledge of the history of art therapy in Canada proved invaluable in the preparation of this chapter.
Marie Revai (b. 1911) began her work as an artist and teacher of art to children after immigrating to Montreal from Hungary. As an art teacher at the Museum of Fine Art in the 1950s, she had a special interest in working with underprivileged children and adults. In 1957 Marie was hired as an artist in the occupational therapy department of the Alan Memorial Hospital in Montreal where she stayed for 19 years helping psychiatric patients. It was during this time that she lectured and, as a result, nurtured a growing interest in art therapy in the Montreal community which, in turn, led to the eventual development of the art therapy program at Concordia University.

What follows is a brief overview of the emergence of art therapy as a discipline in the individual provinces. An expanded version of the events that led to the development of the separate programs in the provinces appears in each of the chapters devoted to these programs. Complete information on the nature of these programs along with application forms may be obtained by contacting the programs directly (see Appendix A for addresses and phone numbers).

ONTARIO

Because of the influence of Martin Fischer as well as Selwyn and Irene Dewdney, Ontario became the first centre for the training of art therapists in Canada. As mentioned above, in 1967 Dr. Fischer founded the Toronto Art Therapy Institute which adhered to a psychodynamic orientation. During the early years, and with the assistance of Krista Soste and Gilda Grossman, he established art therapy practica settings in Toronto schools, hospitals, and mental health settings along with his own training program at the Institute. To further promote the practice of art therapy, in 1977 he founded the Canadian Art Therapy Association, which still remains the only national organization in Canada with the aim of enhancing the profile of the profession. Over the years his many students have helped to further his efforts by promoting the benefits of art therapy not only in Canada but in the United States as well.

By the 1970s the innovative work of the Dewdneys in London had begun to generate considerable attention. In order to promote the discipline at the provincial level and at the same time deal with local concerns, in 1979 Irene founded the Ontario Art Therapy Association. Four years later Anne Harley of the Faculty of Part-Time and Continuing Education at the University of Western Ontario invited Linda Nicholas, a former student of Irene's, to conduct a course in art therapy. Sparked by the interest shown in this course and coupled with the enthusiasm for art therapy training in the London community, the Faculty launched a two year post-baccalaureate diploma program in art therapy in 1987.
Art therapy in British Columbia began in 1969 when Kay Collis, a student of art and psychology at the University of Victoria, was invited to develop an art program at the Victoria Mental Health Centre for people with major mental illnesses. In that year she was also invited to the Menniger Clinic by Robert Ault and to the founding meeting of the American Art Therapy Association. While continuing to work in Victoria under the British Columbia Ministry of Health, Kay established an art therapy department at the Victoria Mental Health Centre and began to receive many requests for training from people in the local community. During this time it was becoming quite apparent that the need existed for a professional association. To meet this need, in 1978 the British Columbia Art Therapy Association was founded which in turn led to the establishment of the British Columbia School of Art Therapy in 1982. Today the Victoria Mental Health Centre still serves as the clinical base for art therapists and art therapy students in Victoria.

In 1978 Lois Woolf, then a recent graduate of the Toronto Art Therapy Institute, moved to Vancouver. Working largely with children in care as an itinerant art therapist in the lower mainland, she too was often asked to provide training in art therapy. Encouraged by her mentor, Dr. Fischer, and assisted by Terry Adler, in 1982 Lois established the Vancouver Art Therapy Institute as a non-profit society as well as a private school registered with the British Columbia Post Secondary Schools Commission. Dr. Fisher regularly visited and taught at the Institute until his death in 1992. Because the Vancouver community has been receptive to art therapy from the beginning, the Institute has been able to develop practica opportunities for students at a number of educational institutions, hospitals, drug, alcohol, and mental health treatment centres, as well as at other community settings in the Vancouver area.

In 1978 Leah Sherman, professor of Art Education at Concordia University in Montreal, invited Michael Edwards of England to offer a survey course in art therapy. As a result of the interest shown in this course he was asked to return to the University the following year and to establish a diploma program in art therapy. The program itself began in 1980 under the auspices of the Art Education Department. In 1981, the year the Quebec Art Therapy Association was founded, Julia Byers was hired to further develop the program. In 1982 the program received permission to offer a masters degree and in 1984/85 an autonomous art therapy unit was established. The program was accredited by the American Art
Therapy Association in 1986 and is seeking to expand into what may subsequently become an Expressive Arts Therapy Department.

As this very brief review indicates, it was largely due to the devoted efforts of a small handful of individuals that interest in the healing properties of art therapy spread across Canada. Today training programs exist in three provinces and a growing number of graduates are entering the field on a yearly basis. As we look toward the future it would certainly seem that more training programs are likely to emerge and that our discipline will become even better known as the beneficial effects of this unique form of treatment are experienced by larger numbers of people.