

Seeing her stories: Finding a place in the landscape of art therapy literature

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Abstract

Viewing artworks is a way of seeing other people's stories. This article discusses the concepts of 'seeing', 'story' and 'her stories', and the ways they have been navigated by art therapists. I map art therapy's landscape of ideas about 'seeing her stories', locate my place within this landscape, and consider how understanding this territory has implications for our field.

Keywords

Art therapy, seeing, women's stories, narrative, postmodernism

Introduction

Art therapy's roots run deeply in the practice of visual arts. To engage visually with artworks requires the act of seeing. Looking at how art therapists have been researching, writing and theorising about seeing artworks, as an essential ingredient in our practice, provides us with insights into changing lenses, views and perspectives that have been part of our professional landscape across the past decades (McNiff, 2011).

As part of my doctoral research into *What can happen when a woman's stories are seen?* (van Laar, 2019), I mapped art therapy's landscape of ideas about 'seeing her stories'. In this article I locate my place in this allegorical landscape. I begin by describing my area of interest: Seeing her stories. I then look at 'seeing' and 'her stories' independently, and the way they have been conceptualised and described in art therapy literature. I share my perspective about my/our place as art therapists in this landscape and the implications of an art her-storical lens for our field.

Viewing artworks is a way of seeing other people's stories. This is not to reduce artworks to a story about their meaning. Rather, it is to remember the evocative and connecting possibilities of stories. We bring aspects of our own life stories as well as our participation in collective stories to our encounters with artworks.

From this perspective, stories are dynamic, open to engagement, and iterative. Each see-er participates in generating meanings each time the

artwork is seen, and stories their own experience of the artwork. Art therapists can use this kind of potentially powerful connection between people and the arts to create exchanges that are meaningful and life enhancing. Importantly, art therapists working with visual arts create opportunities for subjugated and unseen stories to become visible.

In this article, I focus on 'her stories' as examples of such subjugated stories. As art therapists, our "ways of seeing" (Berger, 1972) are central to our practice when working with the visual. My approach to seeing artworks as 'her stories' challenges some taken-for-granted "ways of seeing" (Berger, 1972), and offers an alternative, multifaceted lens through which to view artworks. This lens enables a way of seeing that is at once a sense activity, a relational process and a discursive practice. It is the discursive aspect of seeing artworks that I focus on in this article. This is a viewpoint that rejects notions of 'true' meaning in artworks, and is more interested in how we can facilitate ways of seeing artworks that re-story and disrupt gender, and other, biases.

For example, as a woman painter I use my own embodiment as a sensing, seeing and creating woman to author stories by applying paint to canvas. I avert traditions of women as objects of the male gaze in art history that still permeate popular culture (Berger, 1972; Butryn, 2014). My artworks can be seen as stories of a female

gaze, and part of a growing discourse that values multiple and diverse perspectives.

I have included images of my own artworks to sit alongside this text, demonstrating some of the many ways in which art can work. For example, the artworks might be seen as sensory visual stimuli capable of evoking emotions, memories and the imaginations of viewers. They might be seen as metaphorically illustrating my engagement with the topics of 'landscape' and 'her stories'. They could simultaneously be seen as objects that provide evidence of my painting practice, and that embody a female gaze. These artworks might also make visible something that is beyond the capacity of the text in this article.



Figure 1. Carla van Laar, *Apollo Bay from Nicola and Garth's place*, 2016, pastel, ink and oil on canvas, 400 × 400mm.

While investigating the landscape of ideas in art therapy, I found myself drawn to painting landscapes from life.

Seeing her stories

As an adult woman, painter and art therapist, my curiosity about seeing artworks has continued to be a source of infinite amazement and mystery. I have noticed the deepening of connections and relationships with others as we share our seeing experiences together.

When I created the book *Bereaved mother's heart* (van Laar, 2008), I purposefully made artworks that related to the range of my experiencing following my son's short life. These included themes that I had not been able to find in

the public domain, aspects of my story that seemed to be unmentionable, taboo, unspoken and unseen. Many women responded, writing to me and telling me in person how they had been touched and moved, how they identified with the book, and how they had found parts of their own experiences affirmed by the visual artworks. This fuelled my interest in understanding more fully what happens when a woman's stories are seen.

My work as an art therapist in the community, justice, health and education sectors likewise propelled my interest in women's stories. I share the conviction of narrative therapists (White & Epston, 1990) that cultural and institutional stories perform values. These embedded values serve the interests of particular individuals and groups, often at the expense of others, and are integral to perpetuating and maintaining systems of power and the status quo.

Like many art therapists, I have worked closely with girls and women who have been silenced in fear after being abused and disempowered. I strive to enable people to feel safe enough to find art-based ways of telling stories that subvert oppressive power structures by being authentic to lived experiencing. I use multi-faceted perspectives and practices to create this safety, and am influenced by somatic, mindful, relational and narrative approaches in my therapeutic work (Davis, 2015; Geller, 2013; Levine, 2015; White & Epston, 1990).

While I identify as a woman and as female, I do not identify with socially constructed gender roles that are limiting or disempowering. I understand that along the spectrum of people who identify as women in many different ways, there are people whose stories are more marginalised than mine. However, my own stories of being a woman and an artist are part of a bigger social story in which particular stories are subjugated, privileged less, and afforded fewer opportunities to be seen (Richardson, 2016).

Contemporary interest in the stories of women artists recently inspired the National Gallery of Victoria (NGV) to host an exhibition titled *Modern Australian Women*, which they introduced with this statement:

It is late 2018, a year that has come to be associated with a renewed critical analysis of the expectations and challenges facing girls and women throughout the world, from the

#MeToo movement to the United Nations HeforShe campaign and beyond. A new display at The Ian Potter Centre: NGV Australia offers a reminder that this discussion is a longstanding and still very pertinent one. (National Gallery of Australia, 2018, p.34)

As a lifelong painter, I recall the first time I was gifted a book entitled *Women artists* (Petersen & Wilson, 1976). I was 16 at the time, and I remember the dawning in my awareness that I was a member of this group of people – women artists. I read with intrigue the stories of anonymous nuns in the seventeenth century who had painted tiny insubordinate illustrations of female saints on horseback in the margins of illuminated biblical texts. I was fascinated by the differences between images of pretty and reclining women painted by men and images of feeling and active women painted by women. With my eyes, over the years, I have absorbed many more images made by women, witnessing things like the choices of subject matter, appreciation of organic shapes, honouring of craft and textiles, and feminist artworks that overtly reclaim the female form from the classical male gaze (Grozenick, 2001).

What is ‘seeing’ and how has it been conceptualised and described in art therapy literature?

Browsing dictionary definitions of the verb ‘to see’ gives some insight into the layers of complexity involved in the act of seeing (See, n.d.). ‘Seeing’ can be used to describe the way we perceive the external world with our eyes, and the effort we make when we look at something. In this way, seeing, as a sense activity, can be described as both receptive and active (Findlay & Gilchrist, 2003). We can also see things in our mind’s eye, with our memory or imagination. Seeing can mean the way in which we are aware of, have experience of or know something; we see (visit) a place; or see (discern) a meaning. Seeing can mean that we appreciate or recognise a point of view, as in “I see what you mean.” It can be used to describe interpersonal relating, such as visiting or meeting socially, consulting a professional, hosting a meeting or having a romantic relationship. Seeing can also mean ways in which we deliberate, consider, think, find or inquire, as in “See what you make of this”.

The ways in which seeing has been explored by art therapists in our literature reflects the spectrum of meanings associated with the word ‘see’.

‘Seeing’ (Gilroy, 2008; Harrow, Wells, Humphris, Taylor, & Williams, 2008; Kellman, 1996; Skaife, 2001) in art therapy has been described using a variety of visual sensing terms including ‘looking’ (Cox, Agell, Cohen & Gantt, 2000; Lanham, 1998; Mahony, 2001; Gilroy, 2008), ‘visioning’ and ‘visual processing’ (Kellman, 1996), ‘witnessing’ (Franklin, 1999, Zago, 2008), ‘beholding’ (Skaife, 2001), ‘visualising’ (Harrow et al., 2008), ‘gazing’ (Gilroy, 2008; Smith 2008), ‘active eye movements’ (Gilroy, 2008), ‘observing’ (Cox et al., 2000; Franklin, 1999, Zago, 2008), ‘viewing’ (Cox et al., 2000; Parsons, Heus & Moravac, 2013), ‘aesthetic experiencing’ (Byrne, 2014) ‘envisioning’ and ‘re-visioning’ (Carr, 2014).

In this section I briefly discuss a diverse selection of perspectives that have been influential in shaping the way we see in art therapy education, practice and research. I have chosen examples that illustrate a spectrum from medicalised, diagnostic and clinical expert gazes, psychotherapeutic stories about seeing, dual perspectives that integrate phenomenological and scientific approaches, community-oriented practices, and points of view that foreground the influence of contexts and discourses on our ways of seeing. I have provided a more detailed discussion on these perspectives in my doctoral thesis (van Laar, 2019).

Authors such as Cox et al. (2000) emphasise a clinical approach, in which artworks are viewed as providing evidence to support or dispute psychiatric assessments. Kellman (1996) hypothesised that artworks can provide evidence of particular kinds of perceptual brain functioning related to autism. Harrow et al. (2008) looked at artworks made by cancer patients about their cancer. They proposed that the artworks were representations of the art-makers’ beliefs. From their perspective, they discovered that some of the art-makers’ beliefs were medically inaccurate and could be rectified with more accurate information. These ways of seeing involve looking at clients’ artwork with a diagnostic gaze. Seeing and describing artworks from perspectives such as these can contribute to perpetuating the kinds of expert, scientific and medicalised discourses that I seek to disrupt.

Smith (2008) draws on ideas informed by attachment theory (Winnicott, 2005), and uses these to help her make sense of what happens in the relationship between herself and her client, as she sees both her client and her client's artworks. This perspective attends to ideas about the therapeutic quality of the gaze and empathic witnessing that can occur when artworks are seen. This example demonstrates a therapist telling a psychotherapeutically oriented story about seeing artworks. The author herself notes that she never discussed these ideas with her clients to check if they were congruent with the clients' experiences, and consequently the story about seeing remains the therapist's story.

The viewpoint offered by Carr (2014) illustrates a dual-perspective approach to understanding seeing. The viewers in her study were clients whose portraits Carr had painted. She was interested in understanding what happened for her clients through seeing these portraits of themselves. She conducted phenomenological interviews with them to understand their experience. She then reviewed neuro-biological research to make links between her phenomenological findings and scientific explanations for what had occurred. In her study, seeing the painted portraits was described by participants as enabling them to see themselves from another's perspective, remember the past and envision the future, and strengthen their sense of identity – all very personal and meaningful subjective experiences. Carr describes

seeing as visual perception, and the artworks as sensory visual stimuli. She encourages us to consider the experience of seeing artworks from a scientific perspective, with visual perception being a “‘bottom-up’ neurological process driven by sensory stimulus from the outside world” (Carr, 2014, p.62). This perspective is in keeping with trauma-informed approaches to therapy such as somatic experiencing, in which the therapy involves the use of sensory experiences including seeing, hearing and touching rather than talking about problems, which is considered a ‘top-down’ approach. Carr (2014) attempts to integrate approaches in which both people and artworks are examined as both subjects and objects.

Parsons et al. (2013) depart from psychotherapy's traditional focus on the individual in therapy and broaden ideas about the potential of seeing artworks by using a community-oriented perspective. They conceive of seeing visual artworks as “iterative.... Whereby one story naturally prompts another from the listener, urging the listener to recall other stories related and told” (p.168). For them, seeing visual stories can contribute to the co-construction of new cultural discourses and social action.

Mahony (2001) investigated her own experiences of viewing artworks, and found that the setting in which she was seeing greatly impacted upon her seeing experiences. She highlights that seeing artworks is often a facilitated experience. Sensitivity and respect in where and how artworks are displayed will make a difference to how the seeing is experienced. From this perspective, seeing is contextual.

Gilroy (2008) draws our attention to our own professional socialisation and how we look at visual artworks as art therapists, and urges us to be aware of “the particular requirements, values and attitudes of an occupational group or place of work” (p.259). This may influence us to “become mediators between different discourses” and “moderate the language” that we use (p.259). Finally, Gilroy suggests that “(re)-turning to art historical/visual discourses and practices, alongside those that habitually inform our practices of looking, could be a rejuvenating process, both personally and professionally” (p.261).

The possibility that an artwork can at once be an actual object and a lived experience – as can a person – is an inherently postmodern perspective.



Figure 2. Carla van Laar, *Bernie's place*, 2016, pastel, oil and ink on canvas, 400 × 400mm.

When this artwork and this experiencing person are part of a community and culture that they participate in and are influenced by, layers of meaning are added to our understandings about what happens when artworks are seen. This is a multi-faceted viewpoint, and illuminates complex intersubjective relationships in which seeing is at once a sense activity, a relational process and a discursive practice.



Figure 3. Carla van Laar, *View from Wombat Hill*, 2016, pastel, ink and acrylic on canvas, 1200 × 1200mm.

What are ‘her stories’ and how have they been conceptualised and described in art therapy literature?

Art therapy is a profession of mostly women practitioners (Gussak, 2008). Despite this, most of our literature overlooks the ‘her’ in art therapy, speaking from genderless voices or perspectives that disregard our female identities, lived experiences and stories (Hogan, 2012b). Further to Gilroy’s (2008) encouragement that art therapists (re)-turn to art-historical discourses and practices, we might wonder what (re)-viewing art therapy through an art her-storical lens could look like.

Some art therapists have considered the way in which ideas and practices from feminist and narrative perspectives can be integrated with art therapy (Baines & Edwards, 2015; Burt, 1997, 2012; Butryn, 2014; Gray, 2011; Hahna, 2013; Hogan, 1997a, 2003, 2012a, 2012b, 2012c, 2015; Linnell, 2010; Lupton, 1997). I consider that feminist and narrative approaches are both

discursive practices, and I use the term ‘her stories’ in ways that reflect this view.

I have looked for the ‘her’ in art-therapy literature, and found myself asking questions. Could the absence of gendered voices in art therapy be an indication of our assimilation into discourses that are unseeing of gendered differences in experiencing? Is this tendency perhaps evidence of our internalisation of male-dominated institutional cultures? Could our non-gendered voices conceivably point to a blind spot in our art therapy literature? These questions prompted me to ask: what can happen when women’s stories are seen in art therapy literature?

Lupton (1997) highlighted that art therapy has been a little slow to take up the valuable contributions that cultural studies, particularly feminisms, could make to “critical art therapy practice” (p.3). She highlights that discourse “refers not only to verbal communication but to visual images. Discourses serve to shape representation, and therefore experience, subjectivity and understandings of the world” (p.3). Given that Lupton’s (1997) recommendations are now two decades old, it is surprising to note the continued scarcity of feminist perspectives published in art therapy literature. Although there are some examples of feminist approaches being used in art therapy (Baines & Edwards, 2015; Burt, 1997, 2012; Butryn, 2014; Hahna, 2013; Hogan, 1997a, 2003, 2006, 2012a, 2012b, 2012c, 2015), it seems that the concerns raised by Lupton (1997) remain valid in our field.

Relevant to feminist approaches to art therapy, art becomes a political and social activity, and art therapists become activists by seeking:

to challenge dominant practices in the medical or psychiatric treatment of illness or disability, or to draw attention to the ways in which certain social groups such as women, the poor, the disabled, gay men and lesbians, the elderly, the unemployed and immigrants are routinely stigmatised and disadvantaged in the dominant culture. (Lupton, 1997, p.1)

Lupton (1997) acknowledges that women are not a homogenous group, yet are still a “distinct social collective” (p.3). As art therapists, she encourages us to ask questions about “how the meanings of femininity are reproduced and constructed in art works and other forums



Figure 4. Carla van Laar, *Nicola sings a response* (detail), 2010, pastel, acrylic and oil on canvas.

Throughout the rest of this article I include details from some of the artworks I have painted about women over the past decade.

such as medical and mental health literature” (Lupton, 1997, p.5). Reflection on these issues in art therapy, and our own roles in contributing to representations and discourses of women and our experiencing, cast art therapy into a changing landscape, where we actively participate by “moving away from the personal and towards the political” (Lupton, 1997, p.8).

Hogan (1997b), like Lupton (1997), emphasises embracing a critical and activist approach as women working in the field of art therapy. She stresses the danger of unwittingly contributing to “social and cultural conditions which pathologise women and cause distress” (Hogan, 1997b, p.19). She reminds us that art therapy has the potential to be “oppressive (reproducing the socio-cultural context in which individual pain is generated) if it relies on reductive theoretical formulations and focuses on the individual’s personality alone” (Hogan, 1997b, p.20). She urges us to look at “cultural theory which is not psychoanalytically based as a stimulus for a reappraisal of how we work as art therapists... empowering and liberating, allowing women to challenge their lot and critically apprehend their position in society” (pp.19–20).

Current conversations in art therapy literature, such as those in *Creative arts therapies and the LGBTQ community* (MacWilliams, Harris, Trottier, & Lond, 2019), challenge art therapists to examine the cultural sources of our own privilege and marginalisation. The authors say, “The awareness that can be gained from such a practice is not restricted to one’s clinical practice, it refocuses the lens through which one views the world” (p.20). I suggest that understanding our own marginalisation is as important as understanding our privilege, and can assist us to be more sensitive allies of people experiencing all kinds of marginalisation.

Narrative theory, narrative therapy and narrative research have been explored by art therapists interested in making use of postmodern perspectives (Gray, 2011; Linnell, 2010). Narrative practitioners have likewise been interested in the roles of visual and art-based stories. With their Foucauldian roots in ideas about the inter-relationship between power, discourse, context and experience, narrative practices value the subjectivity of the researcher, diverse perspectives and voices, the externalisation of stories, the sharing of non-dominant stories, subverting the power structures inherent in dominant stories, ‘outing’ stories that masquerade as truths, using personal accounts as ways into understanding, and the power of stories to disrupt and generate ways of knowing (White & Epston, 1990).

Burt (2012) finds connecting threads between feminism and postmodernism with their common



Figure 5. Carla van Laar, *Gretel's portrait*, 2010, oil on canvas, 300 × 300mm.

interest in the discourses, power structures and social conditions, and the effect that cultural stories have on the experiences of individuals. She refers to narrative therapy as an example of postmodern therapy that is compatible with both art therapy and a feminist perspective. Externalising problems, authoring preferred stories, and recruiting audiences and allies to share them are value-based responses that can sit well within each of the three approaches, creating overlaps and meeting places. In keeping with a values-based approach, Burt (2012) finds that her values are the glue that makes it possible for her to create a cohesive approach to her practice in which various paradigms co-exist and interact. Burt highlights that, for her, the feminism, or the 'her' in art therapy, is about anti-oppressive practice. Postmodernism expands this view to include "recognition of the multiple perspectives that come with the diversity in the human race" (p.30).



Figure 6. Carla van Laar, Self-portrait detail from *Henry and me on the rollercoaster*, 2008, pastel, ink and acrylic on canvas.

Finding a place within this landscape – art her-storical implications for our field
Seeing is implied whenever we discuss visual art. As art therapists, it is our responsibility to inquire into "ways of seeing" (Berger, 1972), and the implications for ourselves, the people we work with, our profession and our culture.

Visual images can be thought of as ways to show stories in presentational forms that can be

seen by ourselves and others. Normative cultural stories steeped in patriarchal values dominate much of the popular media and many of the systems and institutions where art therapists find ourselves working. The normative stories that dominate our Western culture are those told from perspectives that are male, Anglo, middle class, scientific, heterosexual and able-bodied.

My personal stories differ from these dominant stories primarily because they are stories from the perspective of a woman and an artist. While I do identify with the gender identity of being a woman, I do not identify with socially constructed roles, terms or conditions of being a woman that are limiting or oppressive. As an artist, I seek to make authentic images of my lived experiences as a woman painter, rather than contribute to the dominant culture of visual stories about how to be a woman and how women should be seen. These are my unique stories.

Other people's unique stories include those from perspectives of cultural diversity, sexual orientation and gender identity, and living with disabilities and illnesses, among other distinctive stories. The under-representation of diverse stories in society's mainstream media, systems and institutions can contribute to experiences of isolation, being misunderstood, unacknowledged or unacceptable, a sense of not belonging, and simply being somehow wrong – or even the existential dilemma of not being real. Authentic and subversive personal stories are the kinds of stories that are given visual voices and spaces to be seen, witnessed and validated in art therapy.

As practitioners interested in art and lived experiencing, art therapists are curious about and make space for unique and subjugated stories to be created and seen. The term 'her stories' reflects the idea that my artworks are visual stories authored by a woman – me.

I have reflected on whether it was important to *me* that I was a woman painting this image of the road (Figure 7). And yes, it was. My journal at the time of painting *The road* gives a glimpse into this importance: "I don't know where this road is going, but I'm driving the car".

Being in the driver's seat is an empowered position. I am aware that, as women, I, my mother, grandmother, great-grandmother and great-great-grandmother have not always been empowered to choose the direction of our lives.



Figure 7. Carla van Laar, *The road* (detail), 2008, pastel and acrylic on canvas.

Figure 8. Carla van Laar, *My desk* (detail), 2008, pastel and acrylic on canvas. This detail shows a mini portrait of me with my two little sons, from a photo amongst the clutter on my desk in the painting.

Figure 9. Carla van Laar, *Visiting Oma* (detail), 2008, pastel and acrylic on canvas.

This detail shows a sketch of Lenie, my Oma, paternal grandmother, drawn from a photo I took of her while visiting in an aged-care village in Brisbane.

Figure 10. Carla van Laar, *Laura May* (detail), 2009, pastel and acrylic on canvas.

This detail shows the portrait of my maternal great-grandmother I painted from a photograph of her as a young woman in the early 1900s.

I am conscious that many of the young women I have worked with in youth justice here in Australia, in the emancipation from sex slavery movement in Nepal, and the young mothers of many cultural backgrounds who are facing homelessness after escaping domestic abuse in my hometown Melbourne, have been less empowered to choose the course of their lives than I am to choose mine. Working with them towards empowerment and agency

in their lives has challenged me to my core to keep striving for empowerment and agency as a woman myself. I have left relationships and institutions when the conditions of my personal and professional contexts are incongruent with the values I bring to my life and work.

Disregarding gender differences in favour of the commonality of human experiencing, or as an action whose intention is in creating equality, poses risks when we share our seeing experiences. Under-acknowledging the contextual differences that impact on a person's capacity to have a similar experience runs the risk of being unseeing to the obstacles that have been overcome along the way, and the resourcefulness, strength and resiliencies that are present and worthy of celebration. This is true not only of gender differences but of other differences too.

Being conscious of our differences and how these can give us more or less access to empowering opportunities in various contexts is part of my experience in being a gendered 'her' in my art therapy practice. My views resonate with Hogan and Cornish's (2014) postmodern perspective on gender in art therapy, and their assertion that: "It may be useful for training courses to offer more work on the construction of gender and on the intersections between ethnicity, cultural affiliation, geographical location, socio-economic status, health, age and gender" (p.134).

Our gendered voices are important in ways that include being aware of the particular challenges faced by women, even privileged women like us, and our ancestors and sisters around the globe. They subvert the cultural male gaze that dominates our society and its institutions and that can even

influence on how we see ourselves. Being seen by each other is important. Our female relationships are important, sharing with each other as mothers, daughters, grandmothers, sisters, nieces, aunts and friends. Our gender as women, and the way this shapes our seeing experiences, are our powerful and empowering 'her stories'.

In choosing to highlight my gendered voice, I acknowledge that my artworks, experiencing, interactions and stories are those of a woman. This is a liberating statement in itself, one that challenges the dominance of certain discourses or 'his-stories', such as the medical discourses adopted by Cox et al. (2000), in art therapy and the broader fields in which we live and work. For me, the contexts I have worked in, in which his-stories prevail, have included the justice system, sporting culture, hospitals, mental-health systems and educational institutions. At their worst, the cultural stories that predominate in these settings serve to perpetuate power dynamics that can dehumanise, belittle, disengage, pathologise and disregard diversity.

In my intention to subvert practices such as these, I went about my doctoral inquiry into *Seeing her stories* (van Laar, 2019) in ways that draw on feminist approaches. The group of co-inquirers was not selected through the dominant practice of grouping by problems such as a shared behavioural difficulty, illness or diagnosis (Lupton, 1997). The participants, in my inquiry came to be involved through our life-enhancing shared relationships and interest in the subject. It was important for me to have female participants as I wanted to bring women's voices into my project and the broader field of art therapy – not as people experiencing particular problems, but as a group that shares experiences of being women, each of us with our own uniqueness and commonalities. I was interested to see what would emerge if we remained committed to exploring our experiencing together, to reflect together, and share meanings together, without resorting to discourses of psychiatry, psychology or psychotherapy. The women who participated in my study regularly expressed that their own commitment to sharing women's stories was a significant reason for their involvement. In these ways, a feminist 'her' was present throughout the research. The ways we explored, the discourses we embraced, and the inclusion of artworks, embodied contextual

experiencing and voices of women as the primary subject matter and source material were evidence of 'her' presence and importance.

Our female experiencing goes beyond our own personalities and life histories (Hogan, 1997b). Layers of our stories overlap with other women's stories. In our individual stories there are also traces of the collective stories that we share with other women: our pasts, our awarenesses of each other's challenges, losses and strengths, and our connections with each other as parts of a "distinct social collective" (Lanham, 1998, p.3) that crosses time and space. Our 'her stories' can serve to connect us as members of the social group we call 'women'. The connecting aspect of this membership is part of what can happen when a woman's stories are seen.

An 'art her-storical' lens for art therapy has the potential to disrupt assumptions held by the institutions in which we have historically housed our education and practice on our collective journey to legitimise our profession. Awareness of this potential brings to the fore more questions than answers.

Conclusion

Seeing artworks is, at once, an embodied sense activity, a relational and connecting process, and a socially engaged discursive practice. As art therapists, we have the opportunity to cultivate multi-faceted ways of seeing.

By its very nature, art practice can be powerful, connecting and liberating in its own right. The production and seeing of artworks can challenge visual and therapeutic practices that oppress and alienate, and cultivate encounters and discourses that celebrate the diversity of lived experiencing.

Within the landscape of therapeutic arts and the contexts in which we practice, our own distinctive yet connected voices and art-based approaches are potent ways in which we can actively contribute to making spaces for subjugated and unseen stories to become visible. Some of these subjugated stories are our own ways of knowing and knowledge production, and lead us closer to re-authoring an art her-storical foundation for education, practice and research in art therapy.

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