



Art therapy at the John and Mable Ringling Museum of Art:

A feminist systems thinking approach to art therapy and museum collaborations

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Abstract

Using Stephen's (2011) Feminist Systems Thinking (FST) as a framework, this paper explores the mutual benefits of collaborative practices between the fields of art therapy and museum work. To exemplify the ways in which art therapy and museums are situated within FST, this paper provides an overview of past and ongoing art therapy museum programs and research projects, including a recent art therapy workshop developed by the author and Ringling museum educators. To develop the workshop, the author and the museum educators worked together to understand each field's unique system and needs. Gathering from the author's experience developing the Ringling art therapy workshop, as well as research from past art therapy and museum projects and Stephens (2011) FST approach, this paper ends with recommendations and ideas for future collaborative art therapy and museum projects.

Keywords: art therapy,
museum, museum education,
systems, Feminist Systems
Thinking

Arts and social organizations have faced increasing economic challenges and limited resources in recent years (Silverman, 2010; Simon, 2010; Weil, 2002). A vital aspect of survival in difficult economic times is collaboration and support among people and organizations with shared goals (Scheff & Kottler, 1996). Using Stephens (2011) Feminist Systems Thinking (FST) theory to explore and compare art therapy and art museums reveals important similarities between the two groups and offers a multitude of opportunities to achieve related goals. When art therapists and museum staff work together, they can create inclusive environments for diverse and marginalized people to explore art, learn about

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themselves and the world, discuss difficult topics, engage with others, and feel empowered to express their unique experiences (Peacock, Hamil, & Dumlao, 2014; Silverman, 2010). This collaboration not only benefits the people and communities who participate in these art therapy museum programs, it also supports museums and art therapists financially. When art therapists and museums work together, they are able to reach more people, bring in a wider variety of visitors to the museum, strengthen museum membership and programs, and improve museum volunteer and staff morale. This paper outlines the art therapy profession, explores the ways art therapists and museums can use a FST approach to collaborate and develop mutually beneficial workshops, and discusses an example of an art therapy and museum collaborative workshop at the Ringling museum. Suggestions for future collaborations between art therapy and museums are also offered.

Art Therapy, Museums, and Feminist Systems Thinking

To provide a foundation for the comparison of art therapy and museums, their similarities, and the ways in which they can collaborate, I will first outline and define the art therapy profession, then explore the various ways in which art therapists are working with museums to develop workshops and programs, and to conclude, outline Stephens (2011) Feminist Systems Thinking, and the ways in which it applies to art therapy and museum collaborations.

Art Therapy

Art therapy is an established profession with a national association, the American Art Therapy Association (AATA), and state chapter associations, as well as a credentialing board, the Art Therapy Credentialing Board (American Art Therapy Association, 2013). Art therapy is also practiced in other parts of the world and many countries have their own associations, training programs, and credentialing processes. In order to apply for registration and board certification as an art therapist in the United States, an art therapist must have completed an AATA-approved or accredited graduate training program in art therapy or a related field and have taken required art therapy courses as well as completed a certain number of clinical hours supervised by a registered or board-certified art therapist (American Art Therapy Association, 2013; Art Therapy Credentialing Board, 2016). Most art therapists have a master's degree in art therapy or a related field, and some have completed a doctoral program.

Art therapists provide services to clients and communities in many places, including psychiatric and medical hospitals, schools, rehabilitation centers, veterans programs, museums, university counseling centers, prisons, juvenile detention programs, private practices, and assisted living communities (American Art Therapy Association, 2013). Many types of people can benefit from engaging in art therapy services as art therapists provide interventions and treatment for children, adolescents, couples, adults, older adults, families and in therapy groups. Art therapists are trained to treat a number of psychological, physical, and medical concerns, including mental health issues, trauma, and relationship problems, and can help people cope with illness, stressors, disabilities, and life transitions (American Art Therapy Association, 2013). Due to their training and unique use of artistic and creative expression in therapy, art therapists are flexible and able to adjust to many situations and settings and can work with people experiencing a variety of concerns.

Benefits of Art Therapy and Museum Collaboration

In recent years, art therapists have started to collaborate with museum staff to provide art therapy groups and programs in museums (Betts, Potash, Luke, & Kelso, 2015; Linesch, 2004; Peacock, 2012; Treadon, Rosal, & Wylder, 2006). Art therapists and museums share common goals as they both utilize art to educate and engage people in reflection and thoughtful contemplation about art, themselves, the world, and difficult life experiences (Linesch, 2004; Peacock, 2012; Silverman, 2010). Furthermore, as arts programs face budget cuts, challenging economic times, and scarce resources, art therapists and museums are developing increasingly thoughtful and innovative programs and collaborations that not only offer important services to the community but also help museums attain the revenue and

funding to keep these programs alive and thriving (Silverman, 2010; Simon, 2010; Weil, 2002). By working together, art therapists and museums can develop sustainable programs that focus on community engagement, social connection, and outreach to marginalized groups (Betts, Potash, Luke, & Kelso; 2015; Peacock, 2012; Silverman, 2010).

Art Therapy Programs at Museums

A number of museums have begun to collaborate with art therapists to provide innovative, educative, and beneficial programs for community members (Betts, Potash, Luke, & Kelso, 2015; Linesch, 2004; Peacock, 2012; Treadon, Rosal, & Wylder, 2006). These programs focus on specific goals, such as community outreach and engagement, empathy development, and offering resources for museum visitors to navigate sensitive topics in exhibitions and artwork. To provide examples of art therapy programs at museums, let's explore several collaborations that address these goals.

Community outreach and engagement. In 2007, Peacock (2012), a graduate art therapy intern at the time, worked with the Memphis Brooks Museum of Art in Memphis, Tennessee to develop the Art Therapy Access Program. The program started as a pilot project modeled after the Museum of Modern Art's *Meet Me at the MOMA* program. Peacock (2012) notes that an important difference between *Meet Me at the MOMA* and the Memphis Brooks *Art Therapy Access Program* is the art therapy component. Peacock (2012) and the museum worked carefully to develop a program that not only engages community members in looking at and engaging with art at the museum, but also provides art therapy sessions for participants. The pilot project was so successful that Peacock (2012) and the museum applied for and received a National Endowment for the Arts Art Works grant, which they have used to continue to build the program and reach a wider audience.

The Art Therapy Access Program, which has now been running for over seven years, includes several components- museum tours led by museum educators, art therapy sessions led by art therapists, and exhibitions of artwork created by participants in the program (Peacock, Hamil, & Dumlao, 2014). The art therapists and art museum educators who coordinate the program work with a variety of local organizations to locate community members who may be interested in participating in the social, educational, and therapeutic services provided by the museum (Peacock, 2012; Peacock, Hamil, & Dumlao, 2014). The *Art Therapy Access Program* is not only beneficial for the community, it also helps the museum bring in community members who may not typically visit to see exhibitions, make art, feel connected with others, and develop a sense of pride in their art when its shown in well-attended exhibitions at the museum (Peacock, Hamil, & Dumlao, 2014).

Empathy development.

Art therapy and museums may also share a similar focus on engaging people to develop empathy and awareness of social issues (Betts, Potash, Luke, & Kelso, 2015). In a study at the United States Holocaust Museum, Betts, Potash, Luke and Kelso (2015) explored how art therapy may engage museum visitors in reflection on important social issues and improve empathy development. The study focused on a group of 24 adult participants from various ethnic and educational backgrounds that were randomly split into two groups of 12 people. The control group visited the museum on independent, unguided tours but did not receive art therapy after their museum visit. The experimental also participated in unguided, independent museums tours and then also engaged in reflective art making and discussion, led by an art therapist. Participants were given pre- and post-test instruments to assess their level of interest in social action, and their situational and enduring empathy.

After the study was completed, Betts et al. (2015) found that participants who engaged in the art therapy activity and discussion reported increased levels of empathy after their museum visit and art therapy activity, and that the difference in empathy between the control and experimental group was statistically significant. It is also important to note that while the art therapy group expressed increased levels of empathy after their museum visit and art therapy experience, the distress levels of both groups were similar (Betts, Potash, Luke, & Kelso, 2015). In other words, the art therapy experience helped visitors engage and feel empathy but it did not reduce their overall feelings of distress in response to the difficult topics explored in the museum exhibition. Feeling empathy can be a distressing experience for people as it encourages us to face difficult and uncomfortable truths about the world. In this study, researchers suggest that art therapy does not reduce distress but helps people access empathy in a safe and expressive environment. The art therapy group participants not only felt empathy immediately after their museum visit and art therapy experience, they also were able to more easily access their emotional responses to the exhibition several months after the visit, compared to the control group (Betts, Potash, Luke, & Kelso, 2015).

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An important and valid question about empathy development through museum and art therapy collaboration is why is empathy development important? And why should museums care about engaging visitors to feel empathy? Part of the answer to these questions goes back to museums' early work in social services as well as their increasing need to engage, connect with, and create sustaining relationships with visitors (Silverman, 2010; Simon, 2010). Visitors who have educational and enlightening experiences at the museum return and thus continue to sustain museums through admission purchases, donations, and communicating positively to friends, families, and professional networks about the museum. Furthermore, from a social justice perspective, engaging museum visitors in experiences that help them develop empathy offers communities positive benefits. Community members who are empathic, engaged, and who care about others tend to help others and contribute in positive ways to their communities (Bethlehem et al., 2016). The benefits of museums and art therapists working together to help visitors develop empathy reach far beyond the museum walls.

Navigating sensitive topics. Related to empathy development, museums and art therapists may work together to help visitors explore challenging or upsetting topics (Linesch, 2004). When the Museum of Tolerance in Los Angeles, California, hosted the traveling exhibit, *Friedl Dicker-Brandeis and the Children of Terezin: An Exhibition Of Art And Hope*, they invited an art therapist, Linesch (2004), to work with them to reach out to the community, invite new visitors, and offer opportunities for people to use art therapy approaches to explore and express their feelings and responses to the exhibition. Friedl Dicker-Brandeis was an Austrian and Jewish artist, educator, and activist, who was sentenced to a concentration camp during World War II. During her time in the camp, she covertly engaged children in art making to help them cope with and express their fears, grief, and other emotions about their experiences. Before her death at Auschwitz, Dicker-Brandeis was able to smuggle the children's artwork out of the camp and it was discovered ten years later.

The exhibition *Friedl Dicker-Brandeis and the Children of Terezin: An Exhibition Of Art And Hope* includes Dicker-Brandeis' artwork as well as the children's artwork created during their time in the concentration camp. During the exhibition, Linesch (2004) and the Museum of Tolerance hosted two weekend workshops for museum visitors of all ages. At the workshops participants learned about Dicker-Brandeis, art therapy, and how art can help people develop resiliency and express themselves in overwhelming situations. Participants were also directed to engage in art making that related to themes in the exhibition and Dicker-Brandeis' work with children. At the end of the workshop, participants returned to the exhibition gallery and discussed their artwork with each other (Linesch, 2004).

The weekend workshops were so popular and successful, Linesch (2004) and the museum decided to develop a five-day art camp for middle school children to explore themes related to family, identity, diversity, and community through tours of the exhibitions at the Museum of Tolerance, discussion, and art making. The day camp culminated with a group art project and the participants' family and friends were invited to a reception to see and celebrate the children's final group art piece. The group art project was exhibited at the museum for several months before it was moved to the lobby of the University Hall at Loyola Marymount University, where Linesch said it served "as an expression of tolerance/diversity as well as increased visibility for the field of art therapy and our graduate training program" (Linesch, 2014, p. 66).

In reviewing her experience working at the Museum of Tolerance, Linesch (2014) states that visitors who engaged in reflective art-making to process their responses to the exhibitions seemed more likely to feel connected to the museum and more receptive to the ideas posed in the exhibitions. This sense of connection and openness can play a pivotal role in museums' efforts to reach out and provide safe spaces for visitors to explore difficult topics as well as develop sustainable relationships with community members. When museums and art therapists work together, they can engage visitors and community members in thoughtful reflection about artwork, challenging ideas, and create experiences for visitors that are both educational and therapeutic (Linesch, 2004).

Feminist Systems Thinking. In her lecture exploring the effectiveness of using Feminist Systems Thinking in developing community programs, Stephens (2011) outlines the five FST principles:

1. Adopt a gender sensitive approach.
2. Value voices from the margins.
3. Incorporate the environment within research/actions.
4. Select appropriate method/ologies.
5. Undertake research/action that promotes plurally desirable and sustainable social change. (p. 2-3).

Stephen also notes throughout her paper that the FST provides both a theoretical framework as well as practical application in real-life program development. FST is thus beneficial not only in framing the similarities of art therapy and museum work, but also in developing art therapy programs and workshops at art museums that benefit multiple systems, including individuals, community groups, museums, and society.

Love and Villeneuve (2017) apply Stephens (2011) FST approach to museum education arguing that FST encourages collaboration and emphasizes inclusion among the different

cogs of the museum system. As art therapy and museum education are two fields working to collaborate within and between their fields as they develop mutually beneficial programs and focus on including marginalized voices and experiences, FST may be an appropriate model to conceptualize and frame the development of art therapy programs in the museum space. For example, Peacock's (2012) collaboration with the Memphis Brooks Museum of Art focuses on reaching people in need of mental health services in the local community, and collaborates with a number of community organizations that serve marginalized groups of people. Linesch's (2004) art therapy program at the Museum of Tolerance and Betts et al.'s research project at the United States Holocaust Museum (2015) both focused on important social topics and examined the ways in which art therapy and museums can work together to explore and initiate social change. Betts et al (2015) also used gender specific and sensitive language in describing their research participants and used a mixed methods approach to explore both quantitative and qualitative data, two important aspects of FST. FST is helpful in examining and assessing current programs to ensure they are inclusive and accessible to marginalized and diverse groups of people (Stephens, 2011). FST is also applicable to workshop and program design, which is discussed in the next section of this paper (Love & Villeneuve, 2017).

Art Therapy Workshop at The John and Mable Ringling Museum of Art

The art therapist and museum collaboration at the Ringling was slightly different from the previous examples listed as the art therapy workshop I provided was offered to museum education staff, docents, and volunteers. The museum education department at the Ringling hoped that providing an art therapy workshop for education department staff, docents, and volunteers would offer useful information about art therapy, how it can be used in museums, and teach the docents and volunteers ways they can expand on their visitor engagement and interaction skills. This workshop format offers other possible ideas for art therapy and museum collaborations. Art therapy workshops and programs are not only beneficial for visitors but may also offer important spaces for museum staff and volunteers to learn about themselves, each other, the art making process, and feel a sense of empowerment in their role as educators and volunteers at the museum.

The John and Mable Ringling Museum of Art

The John and Mable Ringling Museum of Art, originally built by the Ringling family to house and exhibit their extensive art collection, is nestled on a beautiful gulf-side property that also includes a historic home, circus museum, theatre, library, education center, and landscaped gardens (The Ringling, 2016). The Ringling family bequeathed the museum and

eventually the entire property to the state of Florida in the 1930s. In 2000, Florida State University took over governance of the museum and since then, the museum has continued to grow and flourish. In 2007, the museum opened the Ulla R. and Arthur F. Searing Wing, which exhibits traveling and permanent contemporary art, and in 2016, the museum completed construction on the Center for Asian Art and opened its doors to visitors.

The museum is a thriving arts and culture center for local residents as well as many visitors who travel from across the United States and other areas of the world to see the collections, gardens, historic home, and exhibitions at the Ringling Museum of Art. In 2015, a record-breaking year for the museum, over 400,000 people visited the museum, contributing to a 30% increase in visitors over the past four years (The John and Mable Ringling Museum of Art, n.d.). Financially, the museum is also doing well. In 2015, the museum experienced a 1.3 million dollar budget surplus, which Director Steven High reports is in part due to revenue from increased visitation, but also because of intentional and thoughtful financial management (The John and Mable Ringling Museum of Art, n.d.).

Museum Staff and Volunteers

A museum of this size and eminence is run by a surprisingly small group of hard-working staff. The museum also boasts a substantial volunteer program of nearly 600 people, most of whom are older, retired adults, and 68% are women (Rowson Love & Thomas-Zaremba, 2015). In developing this workshop, Dr. Ann Rowson Love and I worked closely with the Education department of the museum. When discussing the idea of an art therapy workshop and asking about the education department's needs, Maureen Thomas-Zaremba, Curator of Education at the Ringling, and her education staff, all expressed interest in a workshop for their department and their docents and volunteers that provided information on what art therapy is and how it's used in museums. They also requested we spend some time in the workshop exploring different approaches docents and volunteers could use to engage visitors in open dialogue about art and art making during activities and programs at the museum.

Developing the Art Therapy Workshop

With this information about the museum and its staff and volunteers, I began to brainstorm some initial ideas for a workshop. Using research about art therapy in museums and information about the structure of art museums and their volunteer programs I formulated some initial ideas. I wanted to provide some didactic material about art therapy and how its used in museums, as well as some experiential and art making activities that engaged workshop participants in experiences at the museum and empowered them to voice their

responses to these experiences. I wanted the workshop participants to experience the museum like visitors again, to see it with fresh eyes, and to also experience art making first hand to help them empathize with the visitor experience. Lastly, I wanted to leave the workshop participants with some concrete tools and skills that they could use in their volunteer work at the museum.

When collaborating with a museum to develop an art therapy program or workshop, FST provides a helpful framework. Love and Villeneuve (2017) have adapted FST and developed a model that is inclusive and collaborative and fits well within the framework of using FST to conceptualize and plan art therapy programs and workshops at the museum space (see figure 1). This model places the exhibition at the center and Stephens' (2011) FST approach honeycombs around the center to encourage reflection and guide planning on the five principles of FST. Applying this to developing art therapy museum programs would situate the art therapy program at the center and then following each step to guide the planning process to ensure it's collaborative, inclusive, beneficial to the system, uses suitable methods, and advocates for social change.

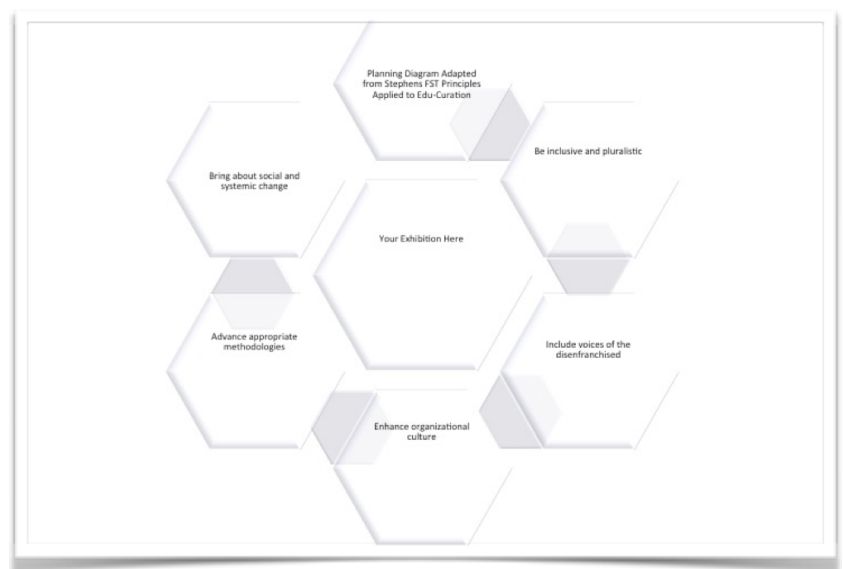


Figure 1. Love and Villeneuve's (2017) adapted FST model for museum

Presenting the Art Therapy Workshop

With Dr. Rowson Love's and Maureen Zaremba's feedback, I narrowed down my ideas to a 3 hour workshop that included didactic, experiential, and discussion components. I presented the workshop at the Ringling on November 7th, 2016, and we had just under 20 participants, most of whom were docents and volunteers at the Ringling and some who were staff from the Ringling education department. The docents and volunteers ranged in age and experience. All of the participants were women, except for one male participant, who attended with his wife, a volunteer at the museum. Some of the volunteers and docents had served at the museum for over fifteen years and some were newer, having just joined the docent and volunteer program in the past year.

During the first hour of the workshop we discussed art therapy and how it's used in museums. I provided participants with an overview of the art therapy profession, including information on the training process, where and how art therapists provide services, and showed a video that portrayed a positive psychology art therapy approach. Next, I provided information on the benefits of art therapy and museum collaborations and provided examples of art therapy programs in several North American art museums. We reviewed art therapy programs and collaborations at the Florida State University Museum of Fine Arts in Tallahassee, Florida, the Memphis Brooks Museum of Art in Memphis, Tennessee, and the Museum of Tolerance in Los Angeles, California. Each program we discussed highlighted the benefits of a collaborative relationship between the museum and art therapists, and exemplified the ways in which art therapists and museum educators share similar goals in their use of art to educate and provide important social services to the community.



Figure 2. Photograph of author and workshop participants standing in the Banyan trees at the Ringling.

During the next half hour of the workshop, we engaged the workshop participants in two experiences at the museum. First, we took a short walk through the museums' gardens to a cluster of Banyan trees. I instructed the participants to use their senses to fully immerse themselves in the experience of walking through the trees.

I encouraged them to use their eyes to explore the light, the shadows, and the textures of the trees, and to use their ears to listen for the wind through the branches, the animals scurrying through the grass and leaves, and the birds singing their excited songs. I encouraged them to touch the grass, the tree bark, and the leaves and to use their noses to notice the smells of nature and the nearby café wafting through the air. We spent about 20 minutes walking through the trees and engaging in the mindful practice of using our sense to explore the space. We then spent about 5 minutes processing everyone's experiences before moving on to the next experiential.

During the next half hour, we took the group to a newly installed exhibition at the Ringling, “Pathless Woods” by Anne Patterson. The exhibition, housed in a large dark room, consists of long, multi-colored ribbons strung from the ceiling in a large square format and lights that shine down from above and within the ribbons. Music plays lightly in the background while visitors are encouraged to walk through the ribbons and make their own path through the exhibition, shifting its appearance as the ribbons undulate around each person.

The workshop participants spent about twenty minutes walking through the exhibition, some staying in longer than others, and many emerging with glowing, smiling faces and exclamations about how unusual and enjoyable the experience was. One participant noted that it reminded her of scuba diving through large schools of brightly colored fish, and the another remarked that the exhibition made her feel like a child again. We then took a short break before heading back to our classroom space for the final activity of the workshop.

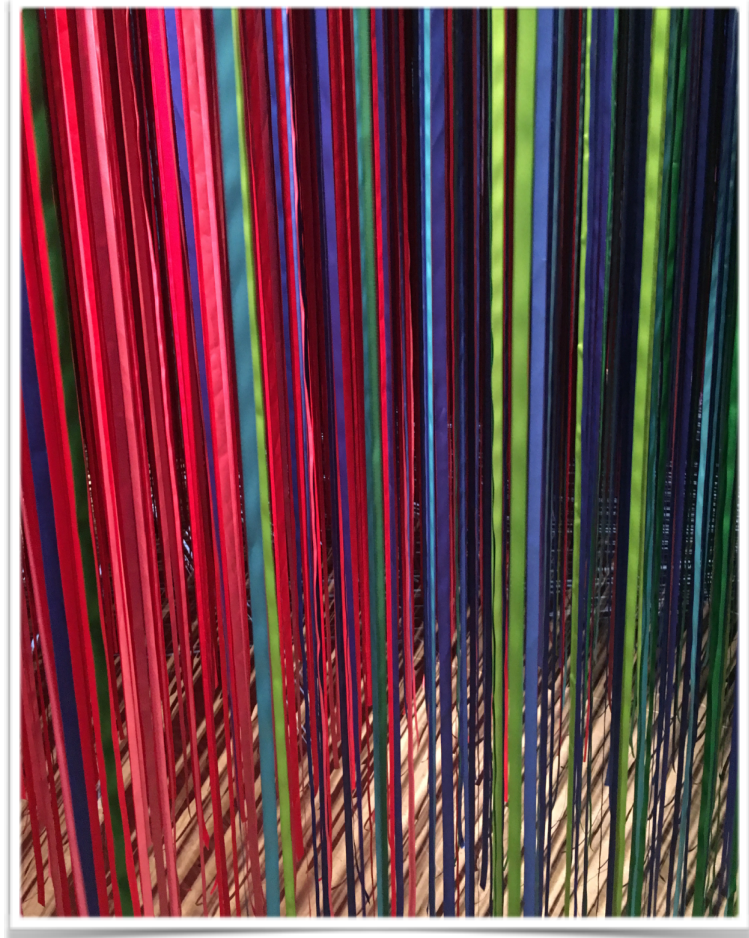


Figure 3. Photograph of Anne Patterson's *Pathless Woods* exhibition at the Ringling Museum.

To encourage exploration of art making and art materials, and to provide an example of how art making can be therapeutic, we developed an art activity that encompassed our two other activities in the Banyan trees and the “Pathless Woods” exhibition and encouraged participants to use those experiences to express themselves through art-making. Before the workshop, we assembled a handmade tree shaped paper sculpture to represent a Banyan tree like the ones we walked through on the Ringling grounds. We also cut brown Kraft paper into long thin strips and tied them with pieces of string. We brought these items, as well as oil pastels, multi-colored sharpies, scissors, watercolors, toothbrushes, and paintbrushes, to

the classroom so they were ready to use during the art making activity. Before starting the activity, we gathered the group around a table and demonstrated ways they could use the art materials to create textured bark and leaves on the strips of brown Kraft paper.

When the pieces were complete, we told the group we would assemble them to the tree, to hang like the long Banyan tree roots. We encouraged participants to remember what they saw, smelled, heard, and touched as they created the Banyan tree roots. Some workshop participants initially expressed some hesitation, saying they hadn't used art materials or



Figure 4. Photograph of author demonstrating the art experiential for the workshop participants.

made art in some time, but after watching the demonstration, they all quickly got to work on their pieces.

The participants worked for about twenty to thirty minutes on their pieces. Some worked together and some alone. Some people chatted and others focused quietly on their drawings. As participants began to finish, we worked together to tape the long root pieces on to the Banyan tree sculpture. Each participant determined where they wanted to hang their piece and we all worked to place and assemble the colorful roots on the tree.

After all of the root art pieces were hung, we spent about ten minutes as a group processing the art making and workshop experience. Several workshop

participants remarked how they felt more present during the activities and the art making as they were focused on the experience and not as distracted by their thoughts. Several participants asked questions about art therapy and noted they saw how it could encourage self-expression and exploration of feelings, thoughts, and experiences. One workshop participant remarked that she expected to learn specific skills or approaches in the

workshop but she ended up learning more about herself and gaining some insight to her internal experience and responses to the art making process. All in all, the workshop participants seemed to enjoy the discussion and activities and expressed appreciation for the opportunity to learn more about art therapy as well as themselves.

Bringing art therapy to your museum

If you are interested in bringing art therapy into your museum and your museum is located in the United States, I encourage you to review the American Art Therapy Association's website, arttherapy.org, to find an art therapist near you. If your museum is located in another part of the world, use an online search engine to find the regional or national art therapy association in your area. Most countries have a national or regional art therapy association and they typically list art therapists and their practice locations online. You can also call or email the association for local art therapists' contact

information. Most art therapists are eager to collaborate with arts organizations and provide services to people who might not typically receive them. Likewise, if you are an art therapist interested in working a museum, call or email your local museum's education department. Use this paper as a starting point to talk about the benefits of art therapy and museum collaboration, and ask what the museum might need or be interested in achieving. Review the museum's mission statement and discuss how art therapy can help the museum meet its goals. Most museum education departments are open and excited about opportunities to reach a wider audience and develop innovative programs.

As you begin to structure workshop or program ideas, consider Stephens (2011) FST approach and Love and Villeneuve's (2017) adapted model for the museum space to ensure your workshop or program is inclusive to diverse and marginalized people, takes appropriate



Figure 5. Photograph of part of the completed paper Banyan tree with the Banyan roots artwork created by the workshop

steps and methods to address their unique needs and experiences, and empowers people to voice their experiences (see figure 5). While the workshop at the Ringling was specifically focused on a sense of place and an exhibit that was unique to Sarasota and the museum, using Stephens (2011) FST and Love and Villeneuve's (2017) adapted model for the museum provides a framework to transpose the ideas presented in this paper to meet the unique needs and strengths of your community and museum space. Considering the museum space and mission, the community's needs, the art therapists' and museum educators' expertise, and utilizing an inclusive FST approach will help develop a beneficial and enriching experience for your visitors, your museum, and your community.

Conclusion

Collaboration among professionals in the arts offers opportunities for us to connect with others who hold shared goals and values and contribute to a more dynamic, supportive, and inclusive arts community. Art therapists and museum workers know that art is an avenue for learning about ourselves and our world, and that art offers opportunities for self expression, healing, empowerment, and social connection. By working together, art therapists and museums can develop workshops and programs with an FST approach to engage community members, museum staff, volunteers, and visitors, and people who many not typically visit a museum to experience these benefits. Art therapy and FST approach may also help a museum reinvigorate and empower its staff, volunteers, and programs, and offer fresh, engaging programs to the public. In return, museums help art therapists educate communities about the benefits and healing aspects of creative self-expression. Art is for everyone, and museums and art therapists can work together to ensure that all are able to experience the healing, educative, empowering, and enriching aspects of art.

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