

# Working with Foster Carers in the role of Therapist at a local Gallery

Siân Hutchinson, Art Therapist

I was employed for 12 months (two days per month) to work with experienced Foster Carers in a newly established, independent foster care agency based locally in Wales, in the role of 'Therapist'.

I arranged for the existing Therapy Group (later known as the Tuesday Group) to meet fortnightly at Oriel Bangor Gallery, alternating with the usual meeting room at the Foster Care agency. Later we held the Therapy Group twice at Bodelwyddan Castle instead (with work on display from the National Portrait Gallery).

## **I decided to try a different venue from the usual office venue for the following reasons:**

1. To improve attendance.
2. To make it easier for Carers to attend by taking the service to the users and alternating the location (north-west one week, north-east the next).
3. To find an attractive venue where people can feel nurtured and comfortable enough to express themselves.

## **I initially choose to meet in an art gallery/museum:**

1. For people to feel nurtured in a relaxing and creative environment.
2. To use objects and images as a starting point to connect people on an emotional level with collections and work with themes e.g. identity, loss, damage, and history.
3. To be outside of the organisational setting.
4. To allow Carers to co participate in the therapy service rather than receive.
5. Viewing and talking about artwork can be playful, a way of 'thinking outside of the box' and being creative. This can often provide relief from feelings of stress and open up feelings of empathy and broaden perspectives.

## **Session structure:**

We started with making a drink (sometimes I would do this) in a meeting room. We talked together and after about an hour, I would ask if they would like to have a look at an exhibition. There were one or two occasions when they chose to continue talking, but usually the group moved out into the exhibition.

Although I had ideas of ways of using objects and images, it transpired that the Carers preferred to look around together and comment on what ever came to mind. We would conclude by going back to the room for another drink and talk about how it felt to look at the exhibition and their plans for the week.

## **Outcomes:**

1. Attendance increased.
2. Carers would talk about their experiences with their young people as well as previous placements.
3. When Carers walked out of the meeting room into the Gallery, they talked about themselves (with no direction from me) e.g. their birth family, childhood and interests. They would then link what they saw with the lives of their looked after children e.g. how there are so many 'things' that we own as young people (e.g. shoes and toys) yet children who come into foster care often arrive with nothing.

## **Exhibition highlights at Oriel Bangor Gallery/Museum which influenced the group:**

- The HMS Cleo exhibit: Between 1877 and 1920 was a ship that accommodated 'difficult boys who needed firm control and discipline'.
- 'At the Mothers Side' was an exhibition of works produced by artists in memory of their mothers and their craft, which had been handed down.

## **Portraits at Bodelwyddan Castle Gallery Museum which influenced the group:**

- Many of the portraits highlight the pioneering work of women over the centuries such as the founder of the NSPCC and the woman who help to change the law so women were able to have access to their children if they got divorced.

## **Exploring outcomes further:**



Figure 1: By Artist Julie Arkell from the group exhibition 'At the mothers side' at Oriel Bangor Museum 2015. On the mother figure is written 'I will teach you to fly'. Added to the image (on the right) are the new titles given by the Carers in the group.

## **Links were made by the Group:**

- To the Museum itself and how Carers help young people to create roots and how sharing stories can be difficult for people.
- To House hold exhibits and routine and how Carers provide structure with creating trust and safety for young people.
- To the Carers' own childhood and influences on the Caring role.
- To the background stories of the Carers and the need for young people to know where they have come from.
- To the Exhibits of Urns, death and the importance of looking after yourself in order to be able to look after others.
- To the importance of doing things together to create memories represented in the gallery experience.

## **Carers said:**

- Using exhibits to talk through something is helpful.
- They felt relaxed and enjoyed ("need") time out.
- How good it is to get out and be in a different space. A change of scene and a chance to talk to someone about confidential matters.
- They enjoyed the more informal approach to the group i.e. meeting outside of the organisation. They have to think creatively to provide the right care.
- Talking by looking at an exhibit (not looking directly at a person) but talking 'through' something could also be helpful to young people.

## **Reflections by the Therapist:**

- 'Going with the flow' and being led by the Carers seemed to help them to feel relaxed, nurtured and eager to attend.
- Knowing carers dietary preferences and providing good quality refreshments made Carers feel thought about, as they always have to think of other people's needs.
- Carers discovered new cultural places to take their family.
- Having the opportunity to split the two hours with discussion and exhibition viewing seemed to offer a sense of 'time out' for Carers.
- The experience of being in a Museum and Gallery gave Carers ideas about ways of working with young people.

# Reflective Practice with staff working in Arts in Health



Siân Hutchinson, Art Therapist and Reflective Practice Facilitator

Reflective Practice is a way of studying your own experiences to improve the way you work. It offers an opportunity to think about the work you are doing, as you do it, or after you have done it. The support of a reflective practice facilitator can improve the performance of artists, enhance the experience of participants and improve team dynamics.

I started facilitating team reflective practice for 'Creative Alternatives', an Arts on Prescription programme, which operates across the Borough of Sefton, in 2013 after meeting the programme's Director during my research for the development of an 'Arts in Health' Tool Kit for Museum and Galleries in North Wales. I was asked to be their Reflective Practice Facilitator because they were aware of the emotional impact that some group participants and dynamics were having on their team members. They specifically wanted to work with a qualified Art Therapist (who had also worked on community arts in health projects). Being an extremely experienced and competent team that worked very well together, they valued the need to maintain and develop their working practice and team cohesion.

## Reflective Practice for staff provided

- Dedicated time and space to 'think' together (in artist working pairs) about the work - in confidence.
- A chance to gauge responses to a situation or idea and talk through strategies.
- The opportunity to voice thoughts 'out loud' to help see the bigger picture.
- The opportunity to have thoughts, actions (and feelings) heard, acknowledged and understood, with reassurance and encouragement when needed.
- Increased awareness that the team may already have the answers, they just needed some help finding them.
- Space to recognise where progress has been made (even when a situation might seem insurmountable).
- Time to bounce ideas off each other (and run with it), build confidence and remind people of their skills and achievements.

My Role in Creative Alternatives is not to facilitate Therapy or Counselling sessions or take responsibility for the health and safety of the service users or their suitability to attend workshops (this is the role of the Referral Officer).

## How the sessions have developed within the setting

I worked individually with the Referral Officer and the Creativity & Health Worker. In their roles with 'Creative Alternatives' the Artists worked in pairs, taking it in turns to lead one workshop in the morning and another in the afternoon. In Reflective Practice, I met each pair face-to-face twice for an hour every six weeks.

After two years, due to financial cuts, I was informed that Reflective Practice provision might be coming to an end. However, after discussion with the wider team it was decided that the service was too valuable to cut and funding was diverted to enable one session per pair of artists during every workshop block using online conference call facilities like Skype. I also continued to do individual sessions with the Referral Officer and Creativity & Health Worker.

## Outcomes for staff

- 1 When working in artist pairs, questions were asked of each other with consideration (which might not have otherwise been asked) and potential solutions were discussed and actions could then be taken.
- 2 Staff thought more about people's roles and responsibilities, for example, when and who to pass things onto.
- 3 Staff became aware of their attachments to participants through their work.
- 4 Increased awareness of their particular strengths and weaknesses enabled staff to think about how best to work in artist pairs day-to-day and complement each other or recognise limitations and also, when to ask for support.
- 5 Sharing in pairs helped with creating strategies for shifting from one role to another when juggling jobs (as freelance workers), as well as time management.
- 6 Growing self-awareness - their own personality traits, working styles and the potential impact this can have on others. Also, acknowledging when the facilitator's needs or wishes override that of the individual.
- 7 Greater understanding of participants' characters and behaviours. Acknowledging when (and sometimes why) 'buttons are pressed' and understanding personality traits in order to help create strategies for managing behaviour and maintaining boundaries.
- 8 Reminder of organisational protocol in order to keep groups manageable and safe and the challenges of keeping to this when unexpected things happen in the groups.
- 9 Bringing the staff back to the aims of the group and what is achievable in the time they have.
- 10 Adopting what can be learnt from previous situations or incidents to their current situation; i.e. what worked well and why.
- 11 Increased support for staff, helping them to understand what is happening in workshop dynamics and why, by explaining some of the theories that are useful in Art Therapy.
- 12 Noticing how the choice of materials and techniques can make participants feel during workshops and how successful actions or art processes can be adopted into future projects.
- 13 Noticing the incidentals that can help a group to work well and not so well.
- 14 Acknowledging the wider benefits and learning that happens through running the group, i.e. what they learn from participants and the wider skills they have as facilitators.
- 15 Noticing participants have different learning skills and how to adapt ways to explain or demonstrate something to suite everyone..

## Reflective Practice sessions also contributed to supporting the team

- 1 When planning transitions.
- 2 Understand the impact of endings.
- 3 When reviewing and enhancing procedures for health and safety.

### Comments from the staff

- “Although I have talked it through with another artist it’s good to talk to an outsider, another perspective. Makes me feel more relaxed and confident.”
- “It’s great to chew over things with an Art Therapist. It really helps things to be clearer.”
- “The group activity we did in the team meeting about ‘imagining our futures’ still influences me...”
- “It’s useful to talk it through. Voice what I’m doing. Thinking allowed!”
- “I thought I had nothing to talk about (as there were no problems), but I haven’t stopped talking! I value this space.”
- “It is so beneficial to make the time to think, process and chew over to come up with solutions.”
- “I wondered if it was worth doing this, but it was worth it, thank you!”

### Conclusions

Providing an induction session for staff enabled me to clarify my role, give some background to my experience in the arts and give staff the opportunity to discuss what they needed from the sessions.

Framing the sessions as ‘Reflective Practice’ and my role as a ‘Reflective Practice Facilitator’ helped to alleviate any misconceptions that the staff would be undertaking therapy, or be judged in any way.

Building up a trusting relationship with artists by working face to face (initially) helped artists to talk freely about thoughts and feelings in their work.

Supporting staff to find their own solutions and acknowledge their own strengths was paramount to maintaining their confidence. There has been an increase in team sharing, interaction and maintaining team cohesion.

*Siân Hutchinson: artb-at.com Creative Alternatives: creativealternatives.org.uk*

## BAAT research highlights

*Dr Sue Holttum & Dr Val Huet*

Dr Sue Holttum, the BAAT research officer has been busy developing the BAAT research work. We thought it would be helpful to give BAAT members an overview of the current work and projects, as this will help us develop our evidence.

### Research podcasts

These podcasts are intended for BAAT members who are new to research. Two are now online in the BAAT research library and they address the basic of ‘What is Research?’ and the difference between research, evaluation and audit.

### Art therapy for psychosis

Sue is conducting a Delphi survey and completed compilation of item list for Round 2 in discussion with Psychosis ‘Task and Finish’ group, using relevant literature, service user concerns and Round 1 responses. Sue has also undertaken a Grounded theory study on how art therapists develop their practice for working with psychosis and the aim is to develop some contemporary practice guidelines.

### Study on dual identity as mental health service user and art therapist

Sue presented findings from a BAAT survey at the 2nd October Attachment and the Arts conference (see conference report in Newsbriefing). She also got ethics approval from her university Ethics Panel for discourse analysis on data from the original survey, field notes from conference, focus group with dual identity interest group, and written comments from course leaders: discourses around being an art therapist with experience of mental distress – negotiating identities. Sue and Val were joined by Ami Woods, Dr Chris Wood to run a training day for BAAT members with dual identity to prepare them to input in art therapy trainings.

### Funding bid planning

We are working towards a funding bid for a trial of art therapy for PTSD.

### Sue’s Papers and other publications

- Co-authoring a paper with Val from her PhD on art therapy and work-related stress
- Co-authoring a paper from a clinical psychology doctorate trainee’s research on art therapy for children at primary school
- Included art therapy in British Psychological Society document for launch May 2016 called Understanding Depression. Included BAAT in consultation of the draft.
- Submitted abstract from the dual identity studies with Val to Counselling and Psychotherapy Research for an article for a special edition on using personal experience in therapy
- Co-authoring a chapter with Val in upcoming book edited by Theo Stickley based on the arts and health ESRC seminar series.

### Clinical psychology doctorate research project on art therapy

- Project by a student on art therapy with psychosis – service user perspectives – has been approved by university review panel and she is now applying for ethics approval and having discussions with art therapists about possible participants.

### Research clinics

- Sue continues to provide consultations to BAAT members who want to develop ideas for research projects.

# Museums & Galleries

## Re-Viewing Museums: Innovative Art Therapy Practice in Museums and Art Galleries

By Helen Jury, Jane Landes and MagSIG

This article presents an overview of the projects that members of MagSIG have been undertaking as awareness in this new and stimulating area develops.

MagSIG was set up in 2013 in response to the growing interest in emergent projects supported or led by art therapists around Britain in museums and art galleries. Art Therapy offers unique opportunities in these distinctive settings sometimes previously seen as outside the remit of art therapy or disinterested in the potential of Art Therapy. The commentary therefore provides a snapshot of current Art Therapy practice and demonstrates some of the many opportunities for creative ways of working with different client groups in museums and galleries which have already been established. This sector presents a small but growing area of practice for Art Therapists and one that is fast developing as museums seek to readdress their responsibilities concerning social and community engagement.

### Why use Art Therapy in Museums and Galleries?

Elisabeth Ioannides (Assistant Curator, National Museum of Contemporary Art, Athens (EMST) and Art Psychotherapy Trainee) offers some thoughts on the significance of the context for this work when she says:

*“For certain individuals, art has a special lure that is difficult to describe because it is such a strong emotional experience. The emotional experience of museum visitors could be seen to be so intense that it stays with them for a long time. These experiences tend to be positive, powerful, and expressive (Robertson, 2011). Researchers have explained that for some visitors, museums are places where they can be dreamy and imaginative, instead of exuberant. Nevertheless, there are some who consider interactions within the museum environment as dynamic social processes between individuals. Aside from viewing the works of art, some visitors go to museums because they want to learn how to create art and among them are those who believe it is therapeutic to create art.”*



Figure 1: Alison Hawtin's Group outside the Fitzwilliam Museum



Figure 2: Montage of images from the 'Creative Heritage and Art in Mind' project

The creation of art, when combined with the viewing of art, aside from promoting group cohesion (ibid., 2011), can become a meaningful medium of psychological expression and integration. Some artists also assert that art may be used for stimulating discussions regarding sensitive issues (ibid., 2011). Museums are being increasingly recognised as venues in which art therapists can expand their practices to encompass new possibilities for engagement with clients and community groups (Treadon, Rosal & Wylder, 2006). This is in line with the notion that museums should be socially inclusive places for learning, and that increasingly they have social responsibilities geared towards the engagement of the general public in their activities.

In the early 1990s, museums started embracing new roles as they sought further involvement with more diverse audiences. Today, governments are developing policies regarding social exclusion in museums and this shift in emphasis from museums as repositories of cultural artifacts to places for social engagement and well-being, presents new opportunities for the development of community-based programmes targeting populations with specific needs, including those with mental health issues. Apart from the social inclusion model, therefore, part of the modern role of museums is the therapeutic role significant in the acceptance a healing element of art."

Emma MacKinnon (Art Psychotherapist) notes the importance of cultural experience (Winnicott, 1971) and describes feeling "wonder and a profound connection to humanity" through her personal relationship with museum space and its objects. She links this to Freud's analogy of buried 'archaeological' unconscious, both individual and collective (Freud, 1937).

#### Art Therapists in the museum context

Art Therapists contribute a unique set of skills to the museum setting, collaborating with museums and galleries in different capacities and in a variety of different roles. To date, successful projects and partnerships that have been undertaken and built upon have involved a wide range of client groups and alliances. For example, Sian Hutchinson has taken on consultancy work for Bangor University and Oriel Bangor Gallery<sup>i</sup> as well as research for an Arts in Health project developed by a group of galleries in North Wales<sup>ii</sup> (following the success of her 'Art B' project<sup>iii</sup>). She conducts Reflective Practice with artists working with vulnerable groups and has also spoken at events such as the Axis Symposium at the Mostyn Gallery 2014<sup>iv</sup>. Also, Jane Landes advises The Ben Uri Wellbeing team and has created a gallery based art therapy clinical placement for trainee art therapists, which is now into its second year.

Working in collaboration with the gallery team is seen as

being invaluable to the overall quality and success of the art therapy work; as well as being able to use the expertise and knowledge of the museum and gallery staff, their existing knowledge of collections, and their experience of social engagement with a public audience. Elaine Homer (Art Psychotherapy Trainee) has made good use of this on her placement attending gallery curatorial talks and briefings in order to enhance her clients' relationships with the gallery collection.

#### Museum or Gallery as a non-clinical, containing setting

There are a wide range of client groups that MagSIG members have worked with on projects, including adults with Learning Disabilities (Alison Hawtin); adults with mental health problems (Maggie Batchelor); young adults with mental health problems (Ali Coles); people living with dementia (Elaine Homer) and carers of foster children (Sian Hutchison). MagSIG is aware of other equally diverse practice in the field that is not included in this article. Common to all of these projects is the notion of the museum or gallery as a non-clinical, safe and containing setting.

Ali Coles' work involves facilitating an 18-week group for 18-25 year olds with severe and enduring mental health problems in Gloucester Folk Museum and in the City Museum and Art Gallery. She says: "it aims to encourage social inclusion. The decision to use a museum setting was made for several reasons. The hope is that using a non-clinical venue will combat stigma and encourage engagement with community resources. Museums keep objects safe and ordered, and thus may help to foster a sense of containment. Finally, visiting the Museums between sessions may allow further reflection and processing by the participants."

Alison Hawtin has run an outpatient / community Art Therapy studio group for adults with Learning Disabilities since 1997. This has evolved over that time in response to the needs of the service users, service requirements and policy / political change. An important aspect of this group has been to visit a local Gallery and Museum Collection. She says: "It was always a well-thought out and planned excursion embedded in a therapeutic frame and relationship. But a key success criteria for us was that it simply looked like any visit to a gallery by any group of people."

'Creative Heritage and Art in Mind' is an innovative museum project in Suffolk, in which local people are encouraged to explore their heritage in creative ways through exploring the rare and intriguing works of art available in the museums. Run by Maggie Batchelor of Norfolk and Suffolk NHS Foundation

Trust (NSFT), the Association for Suffolk Museums initiative has small groups of people who are experiencing mental ill health working with artist Juliet Lockhart, museum staff and NSFT staff to make their own creative responses to the exhibits. It runs across a variety of locations including Gainsborough's House in Sudbury, Ipswich Museum, Moyses Hall Museum in Bury St Edmunds and the Museum of East Anglian Life in Stowmarket. It provides a balance between learning and creative expression. The project, which was devised in collaboration with NSFT, is designed to help participants reconnect with their local community while developing their confidence, independence and resilience. It also aims to challenge stigmatisation and to encourage a better understanding of mental ill health through working collaboratively with museum staff.

Working in the role of Therapist with foster carers, Sian Hutchison says:

*"I decided to meet the Carers for their 'Therapy Group' in a gallery rather than their usual meeting room at the office for the following reasons:*

1. *To improve attendance.*
2. *To make it easier for Carers to attend by taking the service to the users and alternating the location.*
3. *To find an attractive venue where people feel nurtured and comfortable enough to express themselves.*
4. *To be outside of the organisational setting.*
5. *To allow carers to co-participate in the therapy service, rather than to receive it."*

Elaine Homer (as mentioned above) is on clinical placement with a gallery. She is involved in a project that includes a partnership with a local NHS day centre providing support for people living with dementia where she runs an art therapy group. Where possible, participants visit the gallery, after which, selected reproductions of paintings are placed in the day centre. The images provide an ongoing connection throughout the week for participants to the art therapy sessions. In this way, by proxy, the gallery space becomes extended to the day centre.



Figure 3: Elaine Homer and client on a gallery visit

Northumberland, Tyne and Wear NHS Foundation Trust Children and Young People's Service (NTW CYPS) Art Therapists (Michael Fischer, Whittaker Scott, Simon Critchley and Kristin Ricci) are in the planning stages of an art therapy group for young people within their service which they hope will take place at the Baltic Art Gallery in 2015-2016. The aims of this venture include:

- To engage hard-to-reach adolescents
- To support young people who have difficulties with confidence, low self esteem and developing relationships
- To give young people a voice
- To promote mental health awareness in the community

Several therapists, including Alison Hawtin and Sian Hutchison, have mentioned the importance of providing refreshments as a significant aspect of making people feel comfortable as part of the context of the work. Feeling that you have a sense of belonging in the space and are treated well is seen as an important part of the work.

### Use of Museum or Gallery objects

A commonality with the projects mentioned throughout this article is the centrality of the museum or gallery's collection to the therapeutic aims of the art therapy group. As Ali Coles states: "Museum objects will be used to help participants to connect with their own personal stories, and to inspire creativity and the expression of thoughts and feelings through art-making". Jane Landes corroborates this saying: "the Ben Uri collection provides the focus for Art Therapy groups and the impetus for participants to tell their own stories, create their own art work, to feel connected to each other, the gallery and wider cultural life. It provides the context for group Art Therapy".

### Conclusion

The scope for future development of this work is increasing at a tremendous rate. This is partly due to national interest in well-being agendas and a greater understanding of the role to which the arts and art objects can play in contributing therapeutically expands, especially in conjunction with the expertise and professional knowledge of the Art Therapy profession. Future projects for consideration will therefore hopefully include attention to the role of digital technology in the museum and art gallery, as well as how the environment can play a part in the inclusive cultural and therapeutic setting. There is scope to develop a greater understanding of the role that partnerships and skills' sharing can play in enhancing the potential of this innovative and exciting work.

To find out more about MagSIG or if you are interested in joining contact coordinators Emma Mackinnon or Sian Hutchinson via: Art Therapy in Museums and Galleries website: [www.atmag.org](http://www.atmag.org)

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- i 'What's Your Story' App [behaviourscience.org/projects/happy-museum](http://behaviourscience.org/projects/happy-museum)
- ii [artefact.uk](http://artefact.uk)
- iii [artb-at.com](http://artb-at.com)
- iv [www.axisweb.org/features/news-and-views/our-news-and-stories/creativity,-health-and-wellbeing-event](http://www.axisweb.org/features/news-and-views/our-news-and-stories/creativity,-health-and-wellbeing-event)



Elisabeth Ioannides

## When a museum goes Beyond Boundaries

TRADITIONALLY, museums have been perceived according to the collections they store, conserve and exhibit (Leonard, 2010). Since the 1980s they have been redefining their role by becoming more open and accessible to all. This is the social justice perspective of museums, which promotes the notion that they should provide a supportive environment to every visitor, regardless of his or her background. Although they continue to be defined as institutions that collect, protect and make accessible artefacts and specimens, there has been a shift in how they engage with their users and attract new visitors (Leonard, 2010).

Studies show that museums can contribute to social inclusion at individual, community and societal levels (Sandell, 2003; Leonard, 2010). At the individual level, engagement with museums can enhance self-esteem, confidence and creativity. At the community level, museums can serve as “catalysts for social regeneration” (Sandell, 2003, p.45) such that communities are empowered to “increase their self-determination and develop the confidence and skills to take greater control over their lives and the development of the neighbourhoods in which they live” (*ibid.* p.45). Through the representation of inclusive communities in their collections and exhibits, museums “have the potential to promote tolerance, inter-community respect and to challenge stereotypes” (*ibid.* p.45). Nowadays, museums in different parts of the world are

developing their social role, purpose and aims, establishing alliances with “health, welfare, social service and other agencies and are seeking to deliver social outcomes in relation to disadvantage” (*ibid.* p.46).

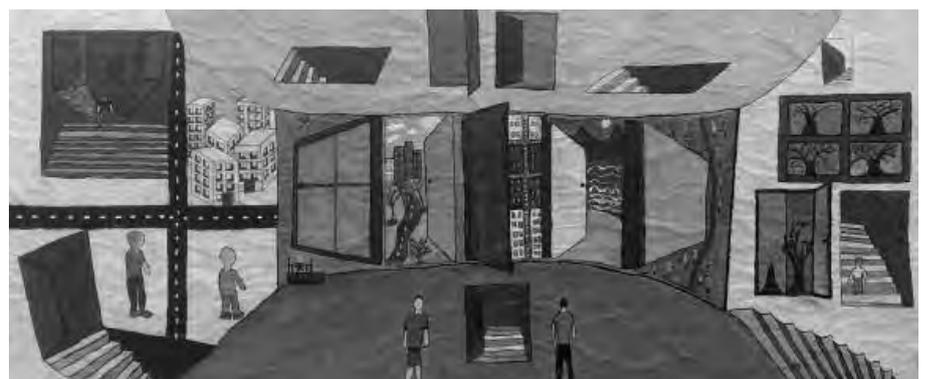
Through its programs and educational activities, the National Museum of Contemporary Art, Athens (EMST) has been encouraging, through social inclusion, the cultural expression of diverse marginalised social groups. In June 2013 EMST presented the exhibition *Beyond Boundaries* which featured works of art made by the students of the Gymnasium-Lyceum of the Avlona Special Correctional Institution for Minors and Young Offenders. The exhibition was part of the annual *EMST Without Borders* program.

Two large-scale paintings (500 x 185 cm and 250 x 97 cm) made in March and April 2013 by 30 students inside the correctional institution, were presented in the museum’s project room along with text written by the students that recorded their experiences and a video that captured the entire creative process. A book in which visitors could write their impressions was placed outside the project room and was delivered to the students at the end of the exhibition. Since the students could not visit the exhibition, this gave them feedback on

their work and filled them with hope and inspiration.

To begin the project, the museum’s educational curators, Marina Tsekou and Kleantchi-Christina Valkana, visited the school in the correctional institution. At the beginning of March 2013, they organized two workshops in which they presented selected works of contemporary art from the museum’s permanent collection to the young offenders. They selected works by Vlassis Caniaris, George Osodi, Andrea Bowers, Danae Stratou, Emily Jacir, Kendell Geers, Carlos Motta, Bill Viola and Dimitris Alithinos. The educational curators chose these works because they dealt with issues of immigration, borders, exclusion, war, violence, racism, human rights, public/private space, solidarity and tolerance. These issues were discussed during the workshops. Each student was then encouraged to create his own drawing which later became part of the large painting.

The resulting intriguing mural, with striking colors, showcased the different paths they may choose the day they are released from the correctional institution. Insecurity and fear were two obvious emotions on their palette. A second collaborative work followed, the title came when a student commented: “freedom means to have many options”.





*Beyond Boundaries*, curated by Marina Tsekou and Kleantchi-Christina Valkana, was held at the National Museum of Contemporary Art, Athens (EMST) from June 18-30, 2013. The collaboration between EMST and the school took place under the umbrella of the Educational Program for Integrating Immigrant and Repatriated Children into Schools, a program implemented by the Aristotle University of Thessaloniki.

Elisabeth Ioannides is Assistant Curator at the National Museum of Contemporary Art, Athens (EMST). She studied Psychology and Fine Arts at Brandeis University in Waltham, Massachusetts, received her M.A. in Art History from the Courtauld Institute of Art in London and a Post Graduate Diploma in Contemporary Art from the Sotheby's Institute of Art in London.

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The aims of the workshops and the exhibition were:

- to bring the students into contact with contemporary art, showcasing the correlation between works of art and timeless political and human rights issues,
- to provide alternative routes to education and
- to promote cultural access, while at the same time assisting the students in their socialisation and in their ability to express themselves freely.

Elio, one of the students, wrote: "...through painting we express these options. On one hand you may choose to join the society, try vocational rehabilitation and social integration. On the other lurks the difficult path of illegality which leads to the same mistakes and of course back to prison".

Armand, another student, showcasing the timely request for a more tolerant society, wrote: "We paint to prove to the "outside" world that despite the fact that here are young people of different races, all together we can cooperate and become a team".

This initiative gave the participants the opportunity to expand their horizons, gain a better understanding of themselves, improve their social and communication skills, and build trust and self-confidence. Thus, museum programs such as this have the potential to impact the most vulnerable social groups, since the most common reason for

marginalisation is society's fear of the "other". This shift in emphasis from museums as repositories of cultural artefacts to places for social engagement and well-being presents new opportunities for the development of carefully planned programs that target populations with specific needs.

