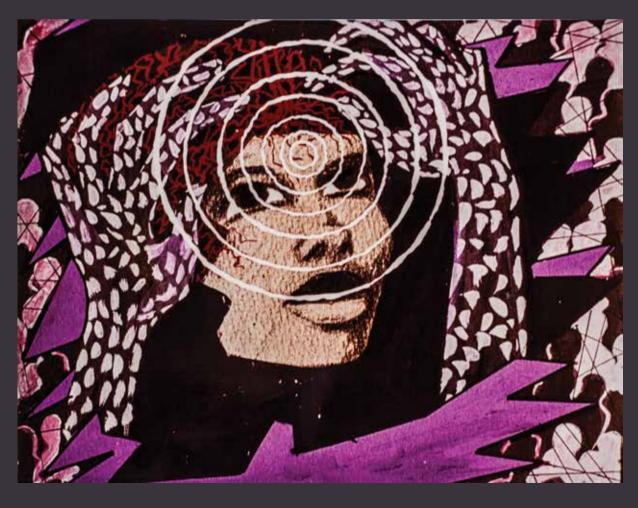
Waiting on the Edge



Bernard Levinson

Waiting on the Edge

2021

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At that point you will be in a state of terror, moaning, "How can we?"
For you will see only the unreliable chain that is meant to drag you in.
It is called Waiting on the Edge.

Anne Sexton
'To Lose The Earth' from Live or Die

By the same author

On sexology

Learning to Love Sexual Secrets The Runners Guide to Sex The A to Z of Sex

Poetry

From Breakfast to Madness Welcome to the Circus I See You I Dreamt I Was Flying

Fiction and nonfiction

The Hanging Machine Still Mind, Strong Heart Step to the Seven Stars

Acknowledgements
This book is dedicated to Marcelle, Gillian and Noelle.

Doctors' children are very special. They grow up in the hurly-burly of telephone-calls, consultations and emergencies. A world in which every person has priority over their own urgent needs.

I wish to thank Sheila, my wife, who patiently listened to each word of each draft, while this book struggled to find a shape.

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Foreword

When Bernard Levinson heard about the University of Johannesburg's Department of Visual Arts in the Faculty of Art Design and Architecture offering the first ever qualification in art therapy, he and his wife, Sheila Levinson-Jarzin, drove to my house and dropped a copy of a manuscript and booklet documenting Bernard's first use of art as therapy when he worked at Tara Hospital in the 1960s. His hope was that this work would be an inspiration and resource to the next (and first) generation of South African-qualified art therapists.

I mentioned to Bernard and Sheila that I had a small research budget for the art therapy and social action outreach activities, and we had recently printed a booklet documenting the first art therapy student cohorts' innovative skills for community action during lockdown. He was so excited by this revelation, and felt strongly this context would be the best and most appropriate opportunity to make his pioneering work accessible to students.

The accounts are moving and compelling, and the insights and innovations remarkable for a record of history and experience from sixty years ago. There was no discipline known as art therapy at the time, so this small publication is yet one more instance in which Bernard Levinson can be considered as a pioneer of a new field.

The biography of Bernard Levinson points to him as a radical innovator, a pioneer and a Renaissance man. To quote Chris Barron who wrote the Sunday Times obituary (22 April 2021):

He influenced a generation of young clinical psychologists and psychiatrists who idolised him for his willingness to challenge mainstream assumptions and conventional wisdom, going where no-one in the mental health profession had thought, or dared, to go before.

He encouraged them to think out of the box in ways far removed from anything they'd been taught at university or read in text books.

This made him both a revered and controversial figure. Without being at all arrogant, he didn't bother too much about the opinion of others, whether

favourable to him or hostile.

He was one of the first psychiatrists to take seriously people who felt they were the wrong gender. The mainstream attitude to this at the time was non-acceptance. Such feelings were generally dismissed as an aberration and treatment more often than not involved trying to link it to a cause such as early childhood trauma.

He encouraged unusual practices such as playing with music or positive messages when everyone believed the [patient couldn't hear although anaesthetised during an operation].

The tribute goes on to state that no less than four international congresses were based on this work, with him giving the opening keynote addresses at the first three.

The obituary notes Levinson was prepared to try just about everything: He started Tai Chi when he was fifty and learning jazz saxophone when he was eighty-five. Until his early nineties, when he was diagnosed with colon cancer, he never missed a Saturday morning lesson if he could help it. He read audio books for the blind for twenty years and stopped practising as a psychiatrist when he was ninety.

What is not widely known, is the revolutionary work Bernard Levinson did using art and therapy, and this book of his work from the 1960s is a remarkable testament and tribute to this extraordinary and empathetic giant.

Sheila, his wife, collaborator, partner, fellow artist and soulmate, has been the gogo to hundreds of young artists over the past decade at Artist Proof Studio. Some of the young people who were exceptionally vulnerable were referred pro bono to Bernard, who, like their studio, showed enormous empathy, kindness and helped them feel validated and empowered to get through their challenges using artmaking.

Bernard Levinson's contributions in and outside of his field will continue spreading influence in the world. It is an honour to be given the gift and opportunity to produce this book of his art therapy work at Tara Hospital.

Kim Berman, Professor Visual Art, University of Johannesburg

Preface

A psychiatric conference in Rio de Janeiro. It is the early 1960s. A few delegates are invited to visit the mental hospital. World psychiatry has just begun to invest heavily in the brave new world of psychopharmacology. The hospital in Rio is understandably short of funds. They still rely on 'talking therapy'. They have an art therapy unit. This interests me. We arrive. The buildings are old and in need of repair. Art therapy is in a shed. Long tables. Patients sitting on either side working.

On admission, many of the patients are given a cardboard box filled with chipped and broken pottery. All of Rio has been scoured for these abandoned damaged pieces of crockery. The box is placed under the patient's bed. At some point early in the patient's admission, they are taken to a court yard with a large cement wall. They are beguiled to throw the crockery against the wall. An abreaction. A moment of letting go. Screaming. Crying. Hurling their pain against the mute wall. Much time is spent holding and comforting the shattered weeping patients after this storm. All the smashed bits and pieces are carefully picked up and replaced in the cardboard box. The box is returned to the ward.

In the art therapy shed, the patients are using the broken pottery as fragments of mosaic. They are creating murals, lampshades, the surface of birdbaths. The occupational therapist moves around teaching, helping, reassuring. They are each converting their uncontrolled rage and anger into acceptable objects they can take home.

Art in this setting is essentially a closing of a circle, a sense of completion, of having resolved and concluded a painful episode in their lives.

I arrive at the Bicetre Hospital in Paris. It is early 1970s. Dr Jean-Claude Lassalle is president of the European Art Therapy Society. A project is underway comparing schizophrenic drawings in every culture. I have brought slides of South African drawings. I introduce myself to the porter at the main gate and am directed to the doctor's office. I walk through a large garden. There is much attention to clipping and shaping of bushes. Flowers and expanses of green lawn. I think of Philippe Pinel who stood at just this spot in 1793 and for the first time in the history of mental health unchained all the patients...

Dr Lassalle takes me immediately to their art therapy department. A large hall in the seemingly endless twists of passageways and wards. Light streams in from high windows. An enormous beaverboard covers one wall. A large sheet of paper has been pinned to the board. The patients are painting an enormous mural. An old galleon at sea. The sails are billowing. The waves towering. Six patients are working on the mural. In the centre of the room a trestle table with tins of paint and brushes. This is the discussion area. A place for ideas and inspiration. Patients stand around the table getting ready to contribute. The therapist is everywhere. Reassuring, assisting, coaxing dull, disinterested individuals, applauding attempts to paint clouds, wheedling the last ounce of creativity from everyone. He is holding their hands. The mural slowly takes shape. A ragged dilapidated sailing ship flounders on a wild mischievous sea.

In the Bicetre, art therapy is used to socialise the patients. Withdrawn individuals are gently coerced into a group project. The enthusiasm and excitement generated by the therapist carries them. They talk. They share. They are in the painting. There is a group energy.

I visit Edward Adamson at the Nethern Hospital in Surrey, England. It is 1980. He is about to retire. His art therapy room sits in the heart of a complex of wards. Beaverboards on all the walls. Large tables. Paints and brushes on tables between the boards. There are three patients painting. Two stand at their boards. The third works on a table. The philosophy is simple. The paintings are not seen by their therapists. No interpretations are made. The art room is never locked. Patients come in whenever they feel the urge to paint. They paint themselves well...

The Tara Hospital, Johannesburg, South Africa, in the late 1950s. The art therapy centre is a hectic room in the occupation therapy unit. Patients are referred by their doctors. The paintings are sent back and used by their psychiatrists as an intrinsic part of therapy. The role of the art therapist is to ease the patient into a comfortable unthreatening relationship with the formidable blank paper. The painting has to, in every way, be the patient's own creativity.

This is not an 'art' to be judged or hung for all to see. This is an opportunity to express what words so often struggle to express. To explore feelings and examine relationships.

Art therapy is a hot dynamic direct path at the very core of the patient's psyche. There are many ways to achieve this. Many techniques. They all work. Once the patient overcomes the initial daunting fear of making a fool of themselves, the transition is easy. There is a metamorphosis. Children understand this. Before education makes them self-conscious and dries

them of all creativity, their drawings are totally free. The paper struggles to contain the uninhibited emotion.

"This is me! This is the joy of being me!"

Individuals trapped in an emotional illness paint with this innocent eye. All is revealed. The magic drawings, the hunt for elusive love, the documentation of trauma and the endless pouring of feelings. The entire kaleidoscope of primitive cave art, and the world of spontaneous child drawings are present in the creativity of disturbed patients.

The three women described in this book were sick. Two of them retreat into the world of schizophrenia. The third had a major depressive breakdown. They were ferried to a psychiatric hospital for treatment. As part of the overall treatment, they were placed in an art therapy unit. In this setting, they came under my care. In their drawings and paintings, they allowed me an intimate glimpse into their world.

Their names and many of the facts of their lives have been altered to protect them.

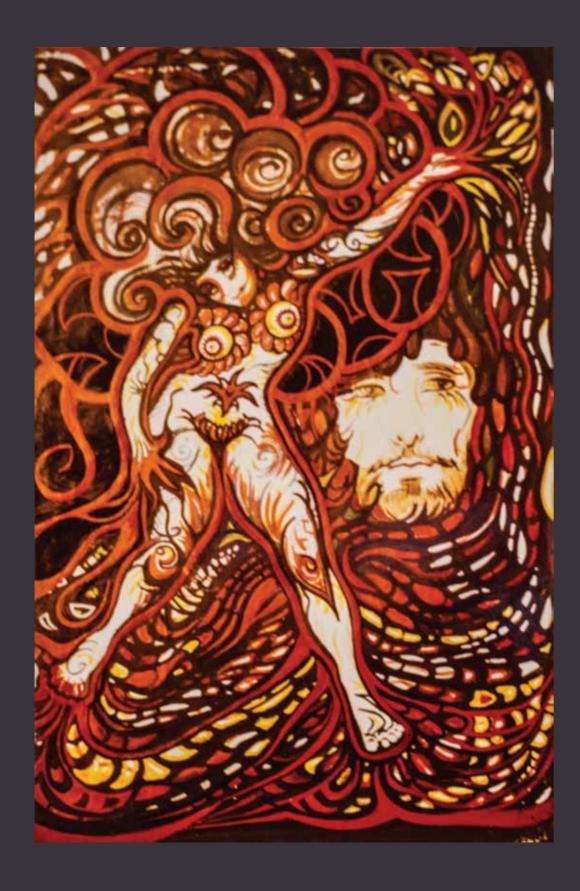
4

ANNA

In your darkness
Where the sick sleep
curled in their blind beds –
there is a splinter of moon,
a surgeon's needle threading the stars
through the wide window of the ward
winding the day's madness into a long narrow sleep.
Come my friend
there is no need to stand
at the side of your bed
living still your day's dream
while the moon sews the night
into a small dark fist
Put the voices away
and let this womb accept you.

Bernard Levinson, From Breakfast to Madness Ravan Press

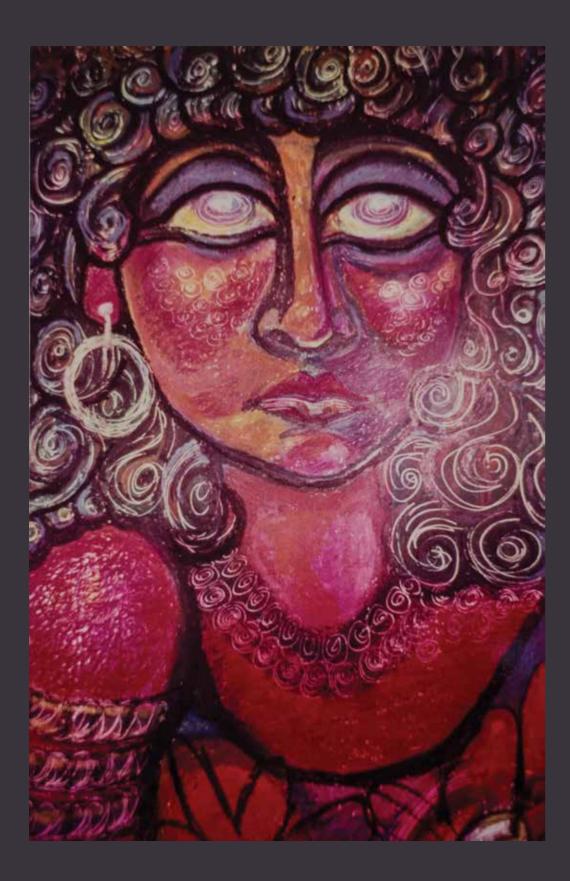
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"I dreamt about you last night,
You came into my ward. You asked for me.
You said I was your child.
I felt so beautiful...."

"Perhaps you could draw your dream..."

"I already have."



Anna is nineteen years old. An art student.

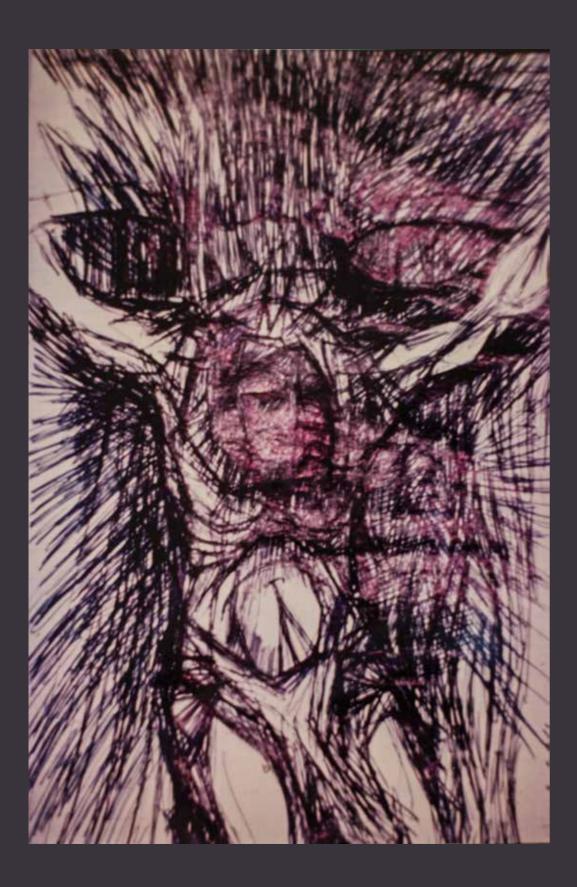
I conduct a Saturday morning art therapy group. Mostly adolescents. Almost all on drugs. This is a unit separated from a hospital setting, and placed in the centre of the town. This allows easy access for individuals in the community, as well as referrals from the hospital psychiatric wards. Art students from the local art school are aware of this group. It is a place of refuge for the occasional student who can use their art to 'work through' a problem.

Anna arrives. No enquiries. No appointment. She finds an empty chair and watches.

We have a set style. The walls are covered with soft beaverboards. A narrow central table set on trestles creates a marketplace for choosing paints, colours, brushes and an exchange of ideas. There is never a preplanning of pictures. No set project. They paint whatever they wish.

At the end of the working time, the central table is removed and the entire group sit in a circle, their paintings on the floor. Each member describes their own drawing. There are always questions. A sharing of ideas and emotions.

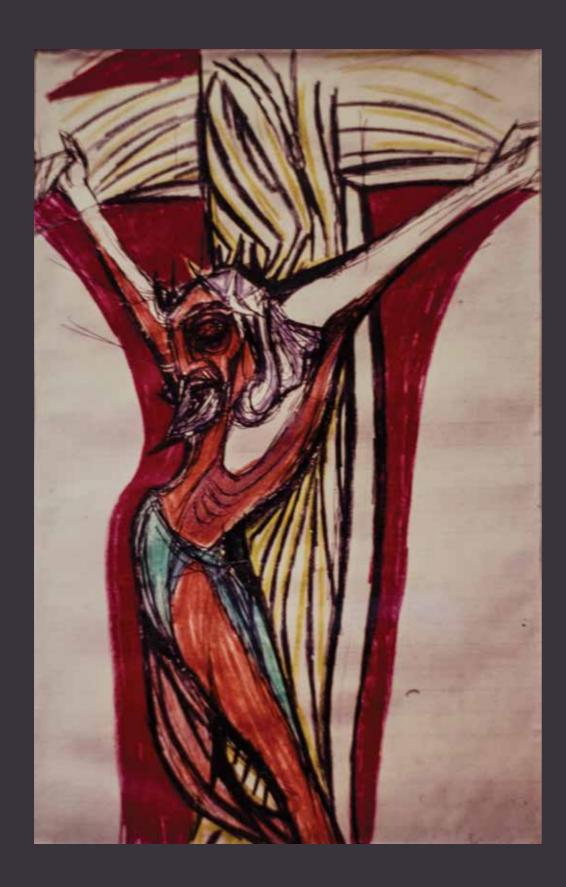
Anna sits in the circle and listens. She remains silent. I am struck by her dilapidation and malnourished thinness. It is a time of drugs and flower-power.



Anna takes a seat. She has a drawing in her hand. Again, I am appalled by how neglected she appears. There is more than the uncaring of youth preoccupied, or flaunting the establishment. The despair of a young girl totally abandoned and lost. The others set their paper on the walls. The atmosphere is electric with movement and preparation. Anna sits and watches. At the end of the session, she takes her place in the circle. Places her drawing on the floor in front of her. When it is her turn, she remains silent. The picture cries out. There is nothing more she can add.

A group has a unique life of its own. It can provide the most intimate support and care. The group immediately recognise Anna's need. She places her anguish at their feet. This shattered Christ figure, headless, chest torn open.

The group remains silent. Intense. Some nod recognition. An identification. A young woman sitting on the floor facing Anna leans forward. There are tears in her eyes. She takes Anna's hand.



A space is found for her at the wall. Anna and I meet. We complete the usual forms. I am aware of a vagueness. An otherworldliness. A dream quality that gives a surreal feel to all the mundane answers to formal questions.

I watch Anna draw.

She is big boned and tall.

Her hair is a wild uncertain colour.

Her face is broad.

There is a Slavic mood in the wide flat cheek bones.

Her eyes disturb me.

At one moment they are frantic with fear, the next intense, searching every corner of the room. When we speak, her eyes veil, allowing me nothing.

The group finally create a discussion circle. The paintings fill the centre. It is Anna's turn. The group is silent. Anna stares at her painting.

"Can you tell us about this Christ figure?"

"I think it's the devil...."



Anna arrives with a drawing.
A pencil sketch on a lined exercise book.
She waits for the group to finish.

She wears a wraparound skirt drained of all colour and design. A man's shirt. Cleaned and ironed. Her hair is tied back. Light corn-brown.

She joins the circle and offers her drawing. "Seems very effeminate to me.

More like a woman than the others..."

"I wonder why you have given him one eye?

Just one blind eye."

"You left the grain out of the cross this time.

It still looks so thick and strong."

Anna remains silent.

I sit in the circle facing Anna.

Her eyes are totally blank.

At the end of each Saturday morning session, the group meet in a café below. I am pleased that the group has drawn Anna into this routine. She leaves with them.



Anna is there. The same chair. She waits silently. She has a drawing on her lap.

A glimpse of colour.

Sunlight.

Her eyes are alive.

She watches the artists hurry from table to wall.

She treats me with reserve. A slight nod of the head.

"I'm glad you've come this morning."

The smallest possible nod.

She sits on the floor in the final circle.

The cross is heavily ornate.

Rooftops. A community.

A sun bursts out of the sky.

No anguish.

"I have such terrible nightmares.

They stay with me during the day.

It was easier this week."

Her voice is so soft, we strain to hear.

"I think this is me.

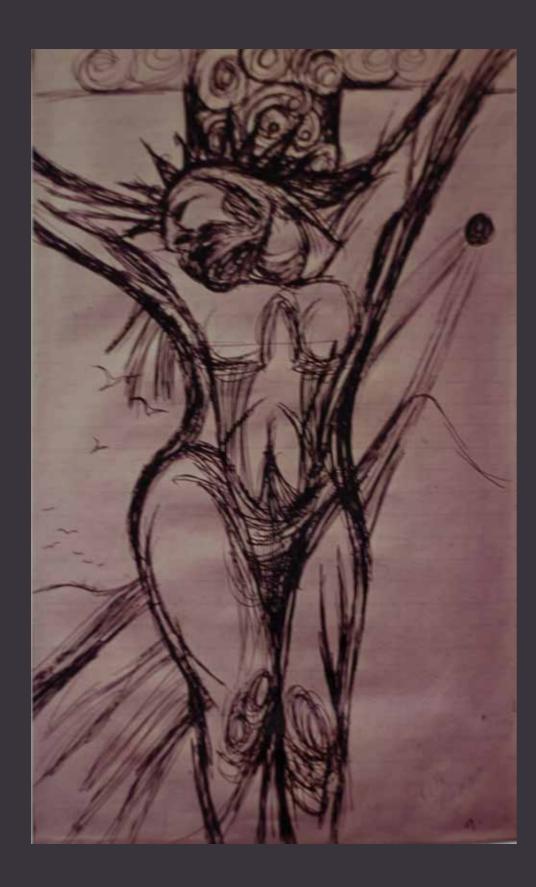
The nightmares hold me.

I'm nailed to it. I can't be free of it..."

"And the sun Anna?"

"Yes, the sun.

There's no pain now..."



Four weeks pass.

This often happens in adolescent groups.

Inexplicably a youngster vanishes. As inexplicably they return.

I feel this is in response to a sense of threat. In some way, we – or I – are too close. They are too exposed.

They need to run.

Only after the defences are re-established, can they return.

Anna walks in, accompanied by a member of the group.

She holds a drawing in her hand.

She waits for the group.

Around her, ten large sheets of paper are being attacked.

Burst of night-blue, shafts of yellow, floods of green and red bleeding onto the brown boards. The room is alive with arms, bodies, noise and colour.

Anna faces forward.

She has turned to stone.

The circle is created.

I miss the transition but Anna is there, sitting on the floor.

Her drawing in her hand.

The cross is ornate.

A background of hills.

Birds flying to her.

A black moon / sun shines on the Christ.

"Can you tell me something about your drawing?"

"It's me."



She maintains her progress.

Her feet are no longer bare. The symbol of the times.

She is in jeans. A loose clean blouse.

Her cheeks have colour.

Her eyes flash at me.

She places her drawing on the floor.

The Anna / Christ figure is jubilant. At peace.

Flowers grow. Birds.

"I'm happy today.

Those birds are me ..."

Much as the dreamer is able to be very element in their dream,

the artist can identify with everything.

She is also the flowers coming to life.

Anna is crucified on her illness.

A powerful, relentless dream.

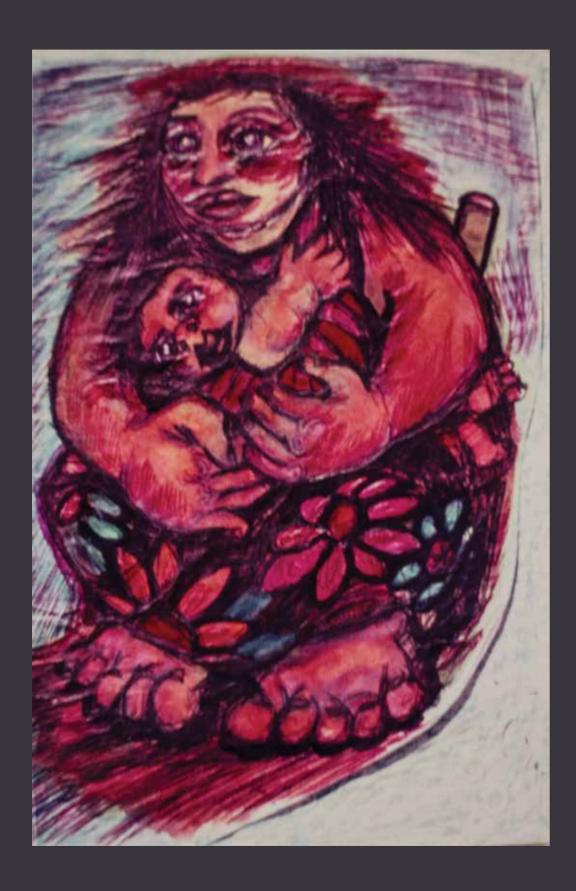
In the caring of this group, the fear is calmed.

I wonder if we are able to take her down from the cross.

My own relationship with her is very slight. She only acknowledges my presence. My usual summing up at the end of the morning evokes little response from her. The group members are her therapists. They call her by name.

She knows their names.

They all leave for the coffee bar.



Anna is at the wall painting.
She works with a cruel intensity.

The picture forces its way through her fingers.

It shatters onto the paper.

No moment of contemplation.

No stepping back.

She paints furiously.

"I feel good.

Feels like being held by a mother."

"Why is baby looking away? Shouldn't it be looking at mother's breast?"

"I'm not sure if mother really has a breast..."

They all laugh.

She shares in the discussion as each painting takes the stage.

Anna transforms the cross into a mother.

She has freed herself.

She is no longer crucified – at the mercy of a solid indestructible cross.

She is now protected by a mother.

Neither babe nor mother smile.

All the eyes are unseeing



The group celebrates.

One member is having a birthday.

The atmosphere is frivolous. Everyone adds something to his painting.

A personal gift.

Anna works alone.

Her new theme demands expression.

Her picture is serene.

The mother, like Anna, is now tidy. Hair swept back. Shoes.

Both mother and child smile.

The child is open, content. Seeing.

Mother, large-breasted. Protective.

Waiting.

The flowers have jumped from the dress into the foliage surrounding the bench. The figures are anchored and relate to the world.

The discussion refuses to be serious.

What they want to say, can only be said in the coffee bar.

They are restless to leave.

Anna leaves her picture on the wall.

A gift to me.



Anna did not return to the group.

Four months later she was admitted to a psychiatric ward.

An acute schizophrenic breakdown.

Her parents brought a portfolio of drawings along with her.

I found this painting in the portfolio.

It is clearly the last in her desperate description of her struggle with the schizophrenic process.

She is again crucified.

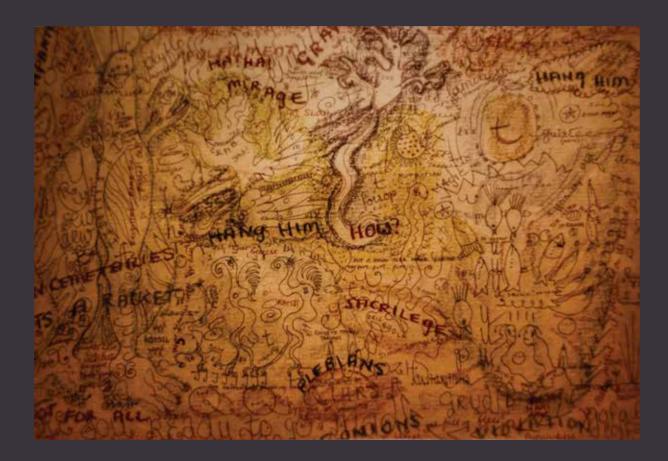
Again the torture.

The anguish.

The crown of thorns – a wild current of pain.

The flowers that grew with her calm sanity are now grotesque.

The birds shrink back in alarm.



Anna is taken to the art therapy unit in the hospital.

I am stunned watching her.

Her clothes are torn.

She has decorated herself with a thousand intricate scratches.

A secret painting on the canvas of her body.

She is deep in schizophrenic excitement.

She responds to all the voices that roar inside her.

She laughs and cries.

Her painting grows throughout an entire morning.

I sit with her and maintain a continuous comforting monologue.

She is only peripherally aware of me.

The illness makes urgent demands.

There are few laws in schizophrenic art.

Those that exist appear in paintings, no matter the age, sex or culture.

The chaotic, disorganised, frantic period sometimes experienced by schizophrenics, reflects always in this way.

Voices write their messages on the painting.

A thousand images.

A thousand ideas.

Mystical symbols.

Jumbled and uncontrolled.

Anna is her painting.



Anna refuses to wear clothes. She shouts back at the voices tormenting her. It is now impossible to reach her.

I am incorporated as one of the many characters ranting inside her.

Sometimes friendly.

Mostly hostile.

She is presented to the psychiatric ward round.

The diagnosis is confirmed.

It is agreed that large doses of phenothiazine be given.

The new world of chemicals to control the storm.

I offer a unique temperature chart.

Daily art therapy as the dosage increases, I also wish to engage in 'talking therapy' as soon as possible.

I am haunted by a smiling child, safe in mother's arms.

Anna rages in her ward.

Her first picture is painted after the first week of phenothiazine.

She fragments the body.

This may be a universal schizophrenic experience.

The body boundary is not only lost, but bizarre.

Her head sits in her lap.

Hands emerge from her anus.



The dosage has increased.

Anna wears a hospital dress. She allows the nurses to tie her hair back.

There are breaks in our conversation while she listens to the voices.

She refuses to discuss the voices.

She no longer answers them.

"Is that you Anna?"

"No that's my father walking on the beach.

You can see his penis.

His penis is blue.

You must not touch that penis.

It's sacred.

That's me – that bird – singing.

I'm telling everyone how powerful that penis is."



A moment out of madness.

She is calm. Able to talk intimately with me.

The drawing is complete when I arrive at the unit.

We sit side-by-side, the drawing on the table between us.

I feel complete contact.

"She's calling for help. Screaming.

I became afraid when I realised she was screaming.

Had to outline her in black to stop her falling apart.

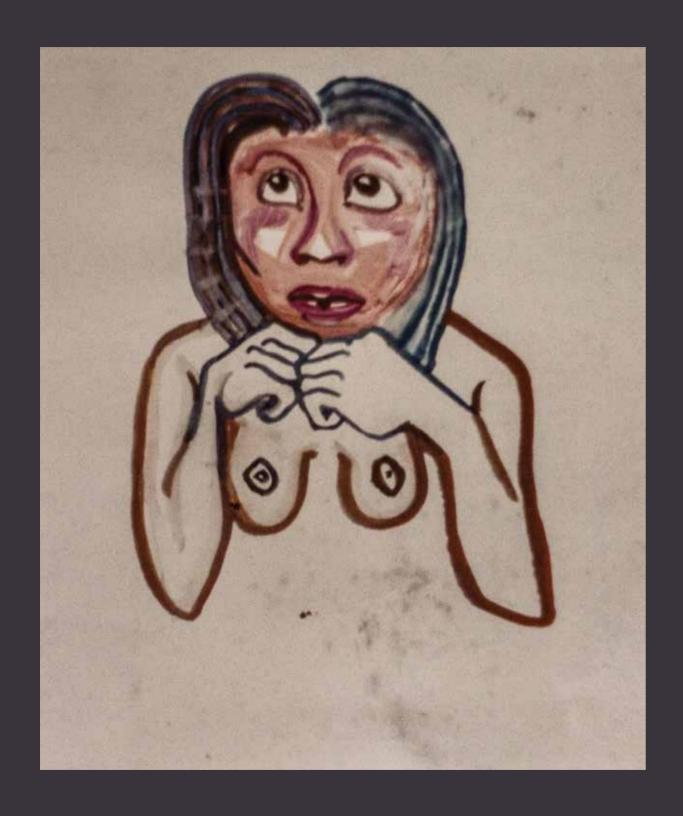
That terrible restlessness.

It's just under the skin.

I'm afraid screaming will let it come out."

"You've given her a penis Anna?"

"Yes. It gives me a feeling of power."



The dosage rises.

We are now in the fourth week of medication.

She comes down to the art department readily.

We use the paintings as a bridge into her life.

"This is me as a young girl.
I was always on the outside.
No one would play with me.
I've never understood that.
I remember always watching other children playing.
I had such fantasies always going on in my head.
My life was so full of fantasy."



"This is my father.

When I get fat, I feel I am my Father."

The psychotic moves from tentative simile to definite metaphor.

Not – I feel I am like – I am my father. His penis is mine. I have his power.

I walk Anna back to the ward.
We discuss the Saturday morning art group.
Another world. An entire lifespan away.
She frowns deeply.
She is silent when we reach the ward.



"This is my mother. She is cold and cruel."

Anger rises and falls.

The monster crucified against a branch of a hideous primeval tree is there. She is grateful for the extra sedation.



The hospital is in the grip of an experiment that fails the moment it starts. Each patient is assigned two therapists. One who will do all the work and who will always be a good loving therapist. To preserve this role, the second therapist is available as the bad denying therapist, able to chastise, withdraw privileges. The good loving mother. The bad father. The good breast and the bad breast. I am both these with my own children. I feel unreal pretending to be one only. The 'bad' therapist is assigned to assist me.

Anna draws us both.

He is drawn in cold colours, rigid, implacably cruel.

I am suspended on strings.

Her own special puppet.

She is able to manipulate me.

"I am linked to everything in the room.

To the whole world. I have all the power. I have the penis.

In my hand, I am holding my sickness.

I am daring you to take it away ..."

Anna has drawn a line between herself and the schizophrenic process. Her painting again conforms to the established schizophrenic art experience. At last a baseline appears. A floor supporting objects in reasonable relationship to each other. We have set the parameters for future therapy. Her identification with father. Her distrust of mother. In this painting, Anna opens the door to her schizophrenic world.

She stands in the doorway.

She is asking for the way home.

Anna achieved a remission from all her symptoms. I saw her in a psychiatric follow-up clinic a year later. She was working and had remained well. Sometime later I heard she had married. She now has a family.

42

CATHERINE

You walk like a long legged bird lifting your feet picking your way through the chaos, Poor lost flamingo flying forever in the dark world of drugs, words and psychiatric couches. You remind me of buildings exposed in demolition looking raw in the sudden sunlight – standing tall and thin bewildered and alone blinking in this unaccustomed world – Poor slick flamingo How shall I lead you out of this madness?

Bernard Levinson, From Breakfast to Madness Ravan Press

44



Catherine has never drawn before.

This is her first painting.

She spends an hour slowly filling these forms with minute brush strokes of black. She is silent.

I watch Catherine leave the art centre.

The occupational therapist is with her. They walk slowly between the tables. Catherine has straight black hair down to her breasts.

A dark curtain opened only sufficient to glimpse her face.



"This is your time Catherine.
You can paint anything you wish.
If you don't feel like painting –
I will understand."

The same formula each day. And each day Catherine sits waiting. Her hands in her lap.

Her father died six months before her admission to hospital. Grief spilled into despair and finally into depression. This depression covers her up completely.

It is three weeks before Catherine tentatively shares her painting with me.

"What have you drawn, Catherine?"

"Shapes." A soft whisper.

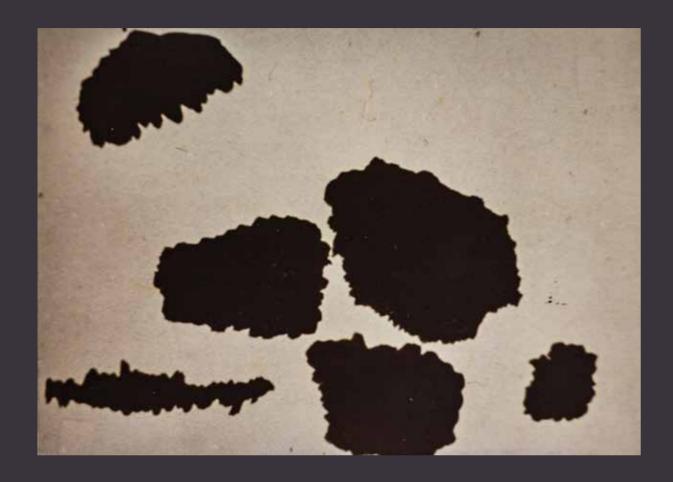
"Can you tell me about these shapes?"

"That's my father's grave. (1) It's so dark."

A long silence.

"And the others?"

"That's a priest praying at the graveside."



This is the core of art therapy.

The patients paint themselves well.

Catherine places these forms on the paper.

She changes their shapes.

Their position on the paper.

Without fully understanding the symbolism of each shape -

she places them in the empty space.

Her subconscious mind is searching for harmony.

A comfortable control.

There are few words.

Once when I clumsily ask if she has all the colours she wants – she smiles.

Catherine's progress is reviewed in the ward meeting. The entire therapeutic team is there. No one is able to contact Catherine.

"If I don't gently coax her, she will sit on the edge of her bed just staring into space."

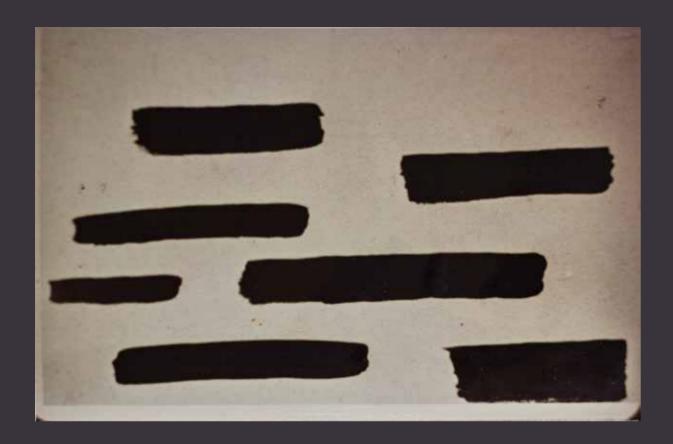
"I've seen her walking alone in the gardens. She hasn't teamed up with any other patient."



Catherine is anguished.
She arrives alone. Sits immediately and paints.
We have long dispensed with the formula.
She knows her place and her need.

The forms spill onto the paper fragmenting in all directions.

I am aware of her pain. She has locked me out.



A calm. Catherine sits at her table painting. There is more control.

She takes care with each shape.

Deep in thought.

"The shapes have returned Catherine."

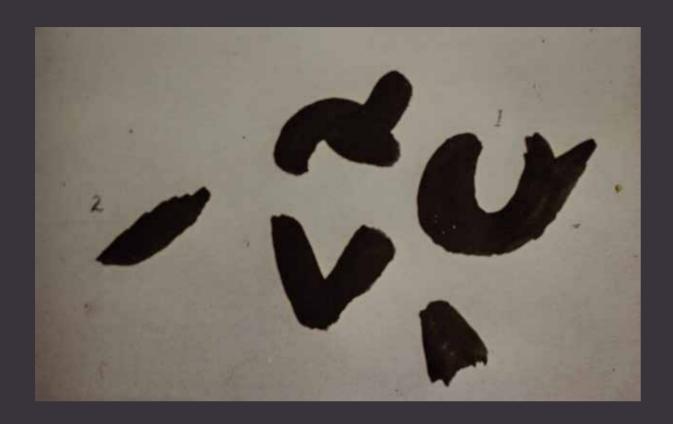
"Yes"

"Can you tell me about them?"

"Shapes. Just shapes."

Catherine is totally in black. Her dress is simple. High neck and long sleeved. I watch her standing at the ward window. Her features are sharp and strained. Her depression is a moat surrounding her. Her paintings are still too flimsy to form a bridge. I can only watch her desolation at a distance. This is the cruel dilemma of the art therapist.

I can only watch and wait.



"Close your eyes a little.
Let this picture fill your mind.
Nothing else exists."
"Yes"
"Tell me about your painting.
What happens inside you?
How do you feel?"

"... My father enjoyed fishing
He would take me with him.
That's a fish. (1)
Such excitement when he caught one.
He was so happy.
He had an expression he would use
when he was fed up. He would say
'Oh feathers!'
I think that's a feather, there." (2)

We talk about her father. How much she loves him.
Her fear of mother. Mother's jealousy at their closeness.
The doors of memory open.
Emotions flood the opening.
Sadness and fear.
She struggles to close the door.



Long vigorous strokes of black.

"Talk to me while you paint Catherine.

Can you put words into that?"

"I'm just angry.

So angry I can scream!"

"Well, why don't you scream?"

She stops. Her brush waiting above the black thunder.

She looks at me.

Her eyes are dark.

Her painting is there in her eyes.

"If I scream you'll lock me up.

You'll think I'm mad.

Everyone will think I'm mad."

"Perhaps you can paint that scream."

For a moment she is uncertain. She looks at me quizzically. She looks at the paper on the table.

"Go on – try."



She places a clean sheet of paper on the table.

New brushes.

Looks uncertainly at me.

She is breathing heavily.

She stands up and slowly studies each colour.

Concentric circles of tension and silence flow from the furthest corner of the hospital.

Catherine is framed in the last small circle.

A sharp intake of air.

She slashes the paper with colour.

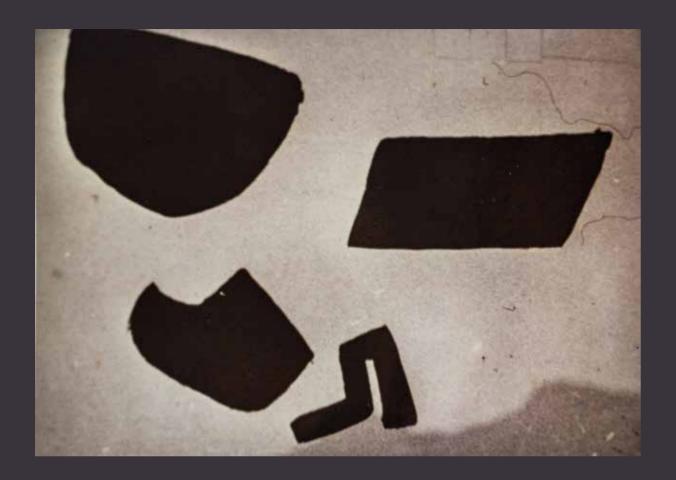
First blue and then black.

Finally green.

She grunts with each breath.

It's over in seconds.

Her hand trembles as she replaces the brushes.



Working again. I sit at her side as she paints.

There are no words. I feel an easiness between us.

I feel comfortable watching her secret life take shape.

I know she will let me in when she is ready.

These shapes take an age to complete.

She is deep in thought.

We both stand and stare at her picture.

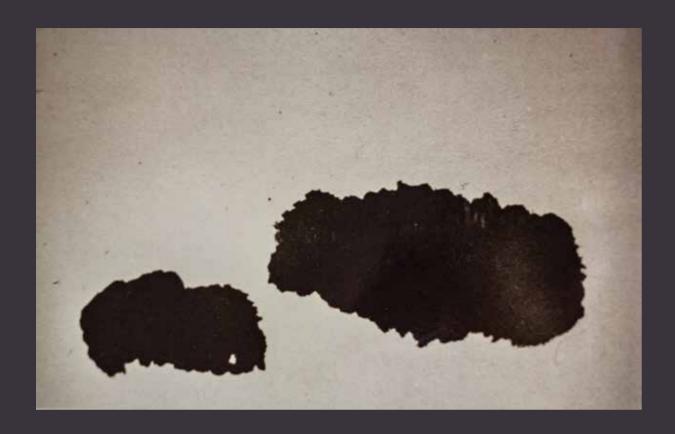
She has made a statement that has some meaning for her.

A dark subterranean cavern whispering.

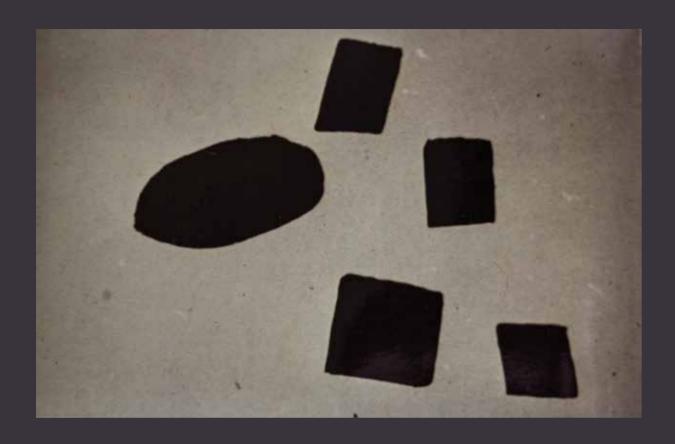
She hears it and knows.

She is strangely satisfied with this picture.

Catherine sits alone in the patients' dining room. She eats little. She watches the other patients. A lonely raven perched on the end of the world. Waiting in silence.



She stares at her picture for many minutes, not moving. Her hands dead in her lap.
Her shoulders deeply hunched.
She has coalesced herself into these shapes.
The occupational therapist sits with her, talking.
There's little response from Catherine.
The shapes and the silence mock us.



"This is my family. My husband and three children. That's me."

"I see you've drawn yourself as an oval, the rest of your family have straight sides?"

"They have sharp sides to bind them. They are trapped in their angles.

I have no sides to bind me. I want to be free. I wish I knew what they want of me.

They pull me in so many directions. I really can't be what they each want." There's an outburst in the ward.

She felt pressured by the other patients.

Her anger was far greater than the incident warranted.

I think we have a volcano here... could erupt.



Today, Catherine walks straight to her table.

She has, over the weeks, established a tentative contact with other patients.

She acknowledges their presence.

At rare moments, she may watch someone draw.

If noticed, she shyly retreats to her safe-table-space.

Today, she is oblivious of everyone.

She starts with an oval form in green.

Stares at it.

Cuts a wild lattice of green across the oval.

Sitting again, calm, she slowly contains the entire picture in a green frame.

"I hate myself.

I don't deserve to be alive."

Silence.

"Again an angry scream?"

"Yes, that's how I feel.

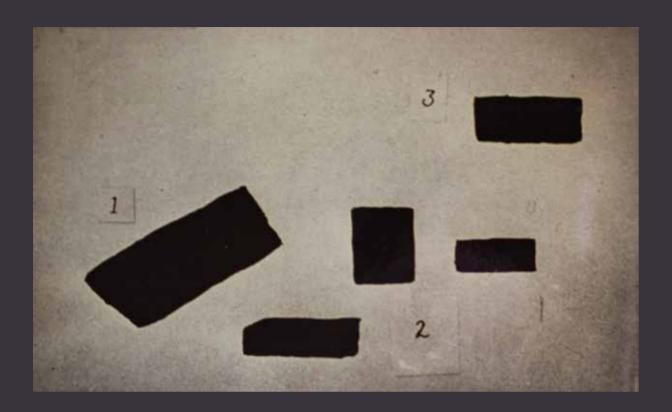
Angry! Angry!"

"The frame....?"

"I can't let anybody know my feelings!

I don't want anybody to know how I feel.

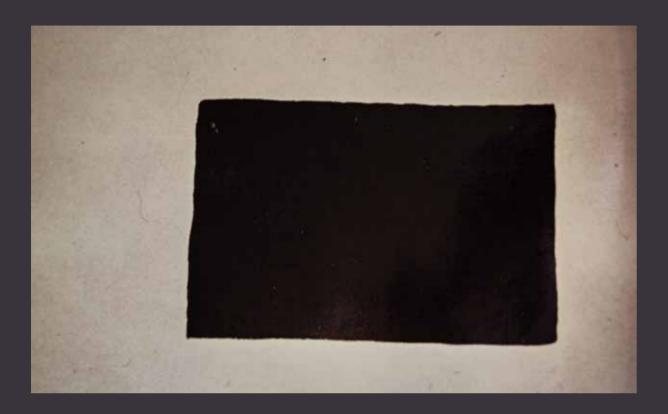
I can't let this anger spill out..."



"This is my family. I think that's me. (1) I drew it as my father's grave. But it's really me. I seem to always be on my own. My husband (3) is so distant. He doesn't know I exist. He doesn't know how to love. My children (2) say they need me. I don't feel that. I think they're embarrassed by me. They don't know what to do with me. My husband keeps them there between us. He keeps out of it. And they're stuck right there with a mother they can't reach. They're all uncomfortable because they think I'm crying for them. I can feel them getting irritable with me. Hoping it will all go away – and they can get back into their lives. How can I tell them, I'm crying for my father. How can I tell them that his love gave me an existence. I'm not sure if I can live without him."



"Just tears. Two Thousand Tears."



Catherine paints this picture before I arrive.

She slips into the room, paints and leaves.

It is Friday.

Catherine is going home for the weekend. This is her first weekend in three months.

I look at her painting. In a sense this is a 'going home gift' for me. I don't turn away from it.

If art therapy has any validity in understanding and treating disturbed patients - each painting must represent that moment's emotional temperature. In sequence, they must create a temperature chart. At this moment there is close to one hundred paintings. I hang them on a washing line using clothes pegs. I slowly walk along the pictures, feeling the ebb and flow of her torment. A pattern slowly emerges. These are 'working drawings'. Members of her family. Symbols of childhood and father. When these cannot be handled, her frustration creates an overwhelming anger. Once she expresses this she returns again to her 'working drawings'. The forms shatter and coalesce. Each time a crisis arises, she turns her anger out, bursting on the paper in a green rage. Finally the anger, bubbling under the surface, turns inwards. Her last picture seals it all, in one tight square.

An alarm bell is ringing.

I walk into Catherine's ward. She is sitting on her bed. Her back is rigidly erect. A closed suitcase on the bed next to her. I pull up a chair and sit facing her. We sit in silence.

Catherine looks at her hands.

"I'm aoina home."

"Yes, I know."

"The bus will be here soon."

A long silence.

She looks at me once.

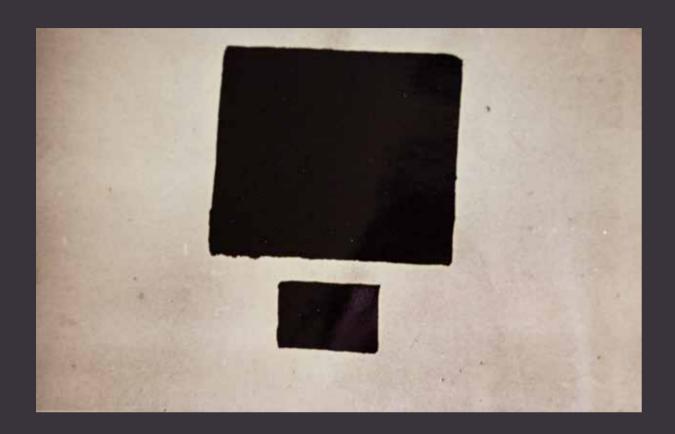
"Catherine..."

"Yes"

"I don't want you to go home. I want you to stay in hospital this weekend. I'm afraid for you. I don't want you to hurt yourself. You will be safe here." She is startled as though I have fired a pistol shot.

Her eyes are wide open enveloping me completely.

This is the first time she is able to cry in the three months since her admission. The dam wall crumbles and the dark waters roar their escape. She allows physical contact. I am able to hold her and rock her gently while she cries. This is the first time I have a sense of reaching her. Of being 'in touch' with Catherine. We are now 'in therapy'.



We return to the beginning. This is identical to her first drawing. She waits for me at her table.

We talk as she paints.

The picture grows between us.

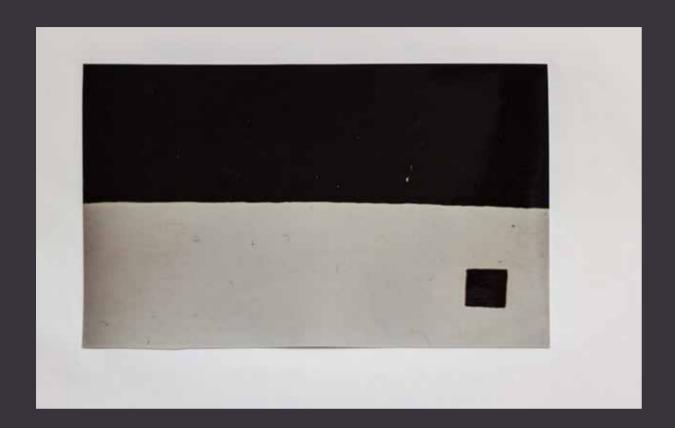
"Now that my father's dead, his wife is living with us."

"His wife?"

"Yes – my mother. I can't call her that.

She doesn't feel like a Mother. She makes me feel like it's my fault, my father's dead. She hates me. She sits in my home like a heavy black rock. She's there all the time. Everywhere. I can't move her or avoid her. I feel she's on top of me, crushing me.

I think my father died to escape her..."



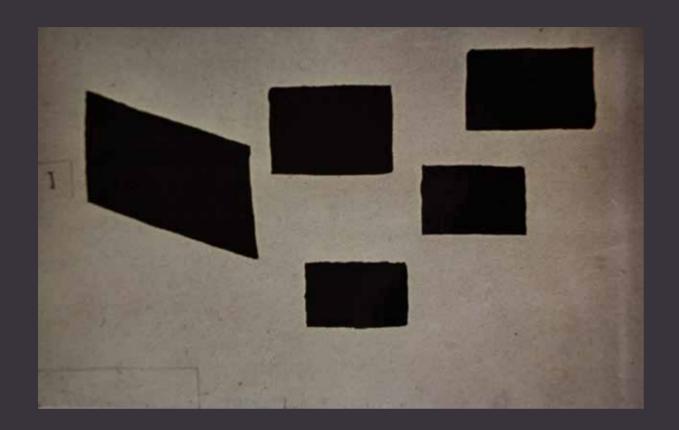
"I guess that's a dark cloud. I have a dark cloud inside me. It's been there for so long now. I wake up in this darkness. I drag myself around with this cloud filling the inside of my head. Will it ever lift? I feel so small. [indicating the black square] There is so much space there. That's such a small square. It looks like it could be overwhelmed." "Overwhelmed?" "Yes. They're waiting out there to grab me. My mother is waiting to pour all her misery into me. She makes me responsible for her whole lifetime of unhappiness. My husband is there waiting to chain me into his bed. With his big sad eyes and nothing to say.

And the children, Oh God, the children. I'm mostly afraid of them. They're so angry at having to cope without me. I can't take their bitterness."

"And Catherine? What does Catherine want?"

"I would like to run away...."

Like Japanese artists who carefully incorporate the unpainted area into the total design, Catherine uses the unpainted area in this picture. A frighteningly large world space, surrounding a lonely vulnerable square.



"It's my family again. I've put my husband closer to me. That feels better today. He brought my mother to see me last night. Actually stood up for me. You know – you could have knocked me over with a feather. I liked that. I really liked that. "

"Did your father protect you against her?"

"He protected me against everything. In a way he kept me as his little girl. Protected and safe. You know – I think I kept myself like a little girl so that he could go on protecting me. It's hard for a little girl to be married. And it's so hard having children who want to be protected. They all turn to me – and I only want to go back to being a little girl."

I discover that Catherine has joined the ward patients' discussion group. In the last meeting they discuss fathers. A young woman cries. Catherine reaches out. They cry together.



I walk into the art room. Catherine is standing at her table painting. Large sweeps of black paint.

"I know this kind of painting. Seems there's always a scream lurking somewhere behind it."

Catherine stands, her brush poised. She laughs. Her eyes are warm brown.

"I'm trying to get angry...

Good and angry.

But it doesn't come.

I spoke to my mother on the phone this morning.

She just couldn't resist a dig.

Like I'm sitting here, enjoying myself while she's got my children on her head.

She's really something!

I'm trying to get it all in this picture – but there's nothing there.

I can't find the anger."



"This must be your last painting Catherine?"

"Yes it is. You know I'm going home tomorrow."

"Are you looking forward to that?"

"A little afraid.

That's the wall I put around everything.

Like I need some control.

I don't want them all breaking in at once."

"I'm glad of the new colour..."

"Yes – that feels good.

There's still a black thing sitting somewhere inside me.

It seems easier to push it away.

I feel stronger about that."

Catherine recovers completely. I speak to her after her mother's death two years later. She has remained well.

INGRID

Weskoppies asleep.
The green roofs
Float in the rising heat.
The old trees
bend to the windows
and listen –
the sick are asleep.
They are dreaming –
their tears flow
into the darkness
Over the waiting trees.

On duty
I only hear
The hospital breathing,
the corridors
the wooden stairs
the warm core
of this dark world
breathing.

Somewhere in the valley trains running northwards
Call to each other.
The sound swims through the night
Into the quiet
of my room.

I am no longer aware
Of the sick
hiding in their lonely beds.
Only inside me
The wide questioning eyes
Refuse to close.

Bernard Levinson, From Breakfast to Madness Ravan Press

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"Is that the psychiatrist on call?" $\,$

"Yes."

"Casualty officer here. I've got a problem I'd like to discuss with you. I have a woman here. She's cut her thigh. You've got to believe this – she's made a fifteen centimetre cut on her thigh. When I asked her why – she just said she wanted to see the muscles. I think we've got some sort of psychiatric thing here. She's not in any pain or anything. Just walked in and asked if I'd suture it up for her. Sort of finished whatever it was she wanted to see."

"Is she in any danger?"

"Well – no. I mean she's not really suicidal or homicidal..."

"Is it possible to admit her? Anywhere? I'll transfer her to a psychiatric ward tomorrow."

"I'm sorry. I really can't give you a bed for this. Would you like to come down and see her?"

"Can you get her to the phone? Perhaps I can arrange something with her." "Sure. Hold the line, I'll get her for you – "

"Hello, I'm sorry, I can't find her anywhere. She just walked out. I'm sure she'll be back. This is the fourth time I've seen her. I can tell you – she gave me a fright when she first walked in. Must be some five months ago. Just walked in with a long incision on her left forearm. Would I please stitch it up, I mean, can you believe such a thing?"



Ingrid surprises me.

I suspect something bizarre.

A grasshead, sleepwalker, paying off her guilt by damaging herself during a marijuana high.

Carrot-coloured hair in the 'Prince Valiant' style.

The long legs and small bust of a model.

Twenty-six years old.

She talks easily.

French. An immigrant.

I sit in her bachelor flat and drink tea.

She is a commercial artist for a large clothing store.

No friends. No relationships.

She rarely leaves her flat.

I comment on her startling pictures.

Black scraper board. Meticulous details.

I describe art therapy to Ingrid.

"You have this ability.

Let's use this to understand your problem."

Her face clouds for a moment.

"If you think it will help."

I note a large portfolio of sketches against the wall.

"May I take that?

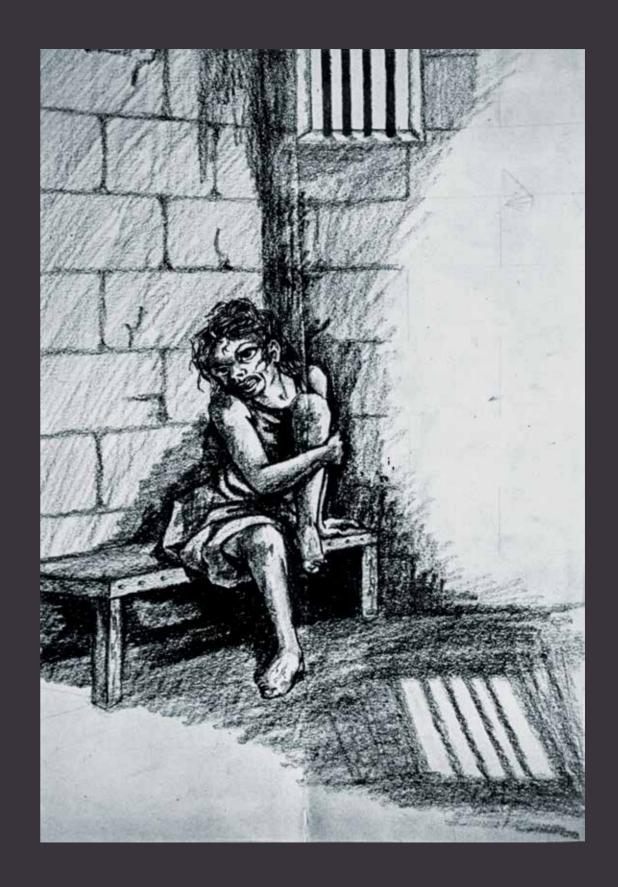
There may be something there... "

I have switched her into a different gear.

A long silence.

"Yes – if you want to..."

A small faraway voice.



This drawing is in the portfolio.

It haunts me.

I have it on my desk when Ingrid arrives for her first session.

She is clearly uncomfortable.

The drawing cannot be ignored.

"That's me..."

"You?"

"Yes. I don't feel very beautiful."

I look up from the drawing to find her eyes on me.

Dark green cat eyes of the redhead. I can't pull my eyes away.

"You can't know what it feels like.

My kind of life.

For weeks, I hardly speak to anyone.

I'm a prisoner.

I feel so ugly – like some hideous monster.

No one knows what loneliness is..."



Ingrid sees me privately.

She paints in her flat, and brings the painting into the session.

The first paintings are brilliant. She is impressing me with her talent. Her training. Her obsessive attention to detail. The paintings take me gently away from Ingrid.

They control the entire session

"Come Ingrid. You are taking me everywhere except where we both need to go. I know you are afraid. I don't know what it is, that sits there inside you, making you so afraid."

"Yes."

A small vulnerable child.

I am afraid of this vulnerability.

"I want to use hypnosis Ingrid.

Let's go behind the thinking and planning

I want to relive your childhood with you..."

We enter this dark tunnel together.

The skilled painting is by-passed.

The drawings are crude.

Cartoon-like.

Ingrid is adopted.

Mother falls pregnant soon after.

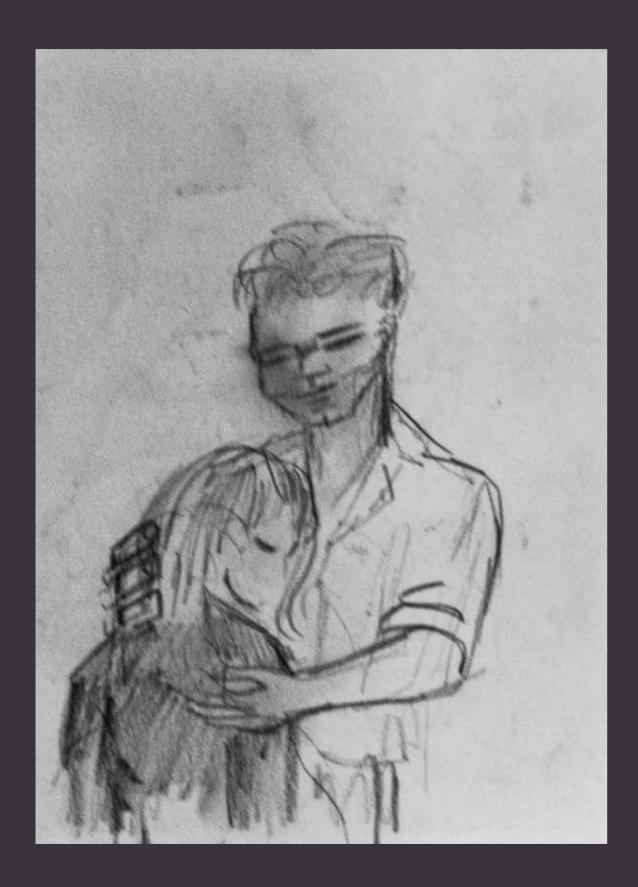
A son is born.

We relive his birth.

His first appearance in a pram.

The joy of their own child.

"No one knew I was there..."



I try to involve Ingrid in living.

I push her into a social group.

People of her age who feel alone.

A young man is attracted to her.

Ingrid is aware of my manipulations. She is strangely passive. Our conversations are drawn and almost totally linked to a painting. Her comments are brief. She accepts my manipulations without question. Also without interest.

She continues to cut herself.

Ingrid arrives with three small sheets of paper. A pencil sketch on both sides of each sheet. She places the first drawing on the desk between us.

"Is that your new friend?"

"Yes."

Little girl's voice. She avoids my eyes. Stares at her drawing.

"He's very protective..."

"Yes. He says he loves me.

I can't believe that.

How can he love me?"



Ingrid turns the paper over.
The second drawing –
On the overleaf
"He will use me!
I'm afraid
he will rape me.
He will kill me."



Ingrid is Catholic.

A limp cross hangs from her neck.

I invite a Catholic priest to join me in the therapy.

He is warm and sincere.

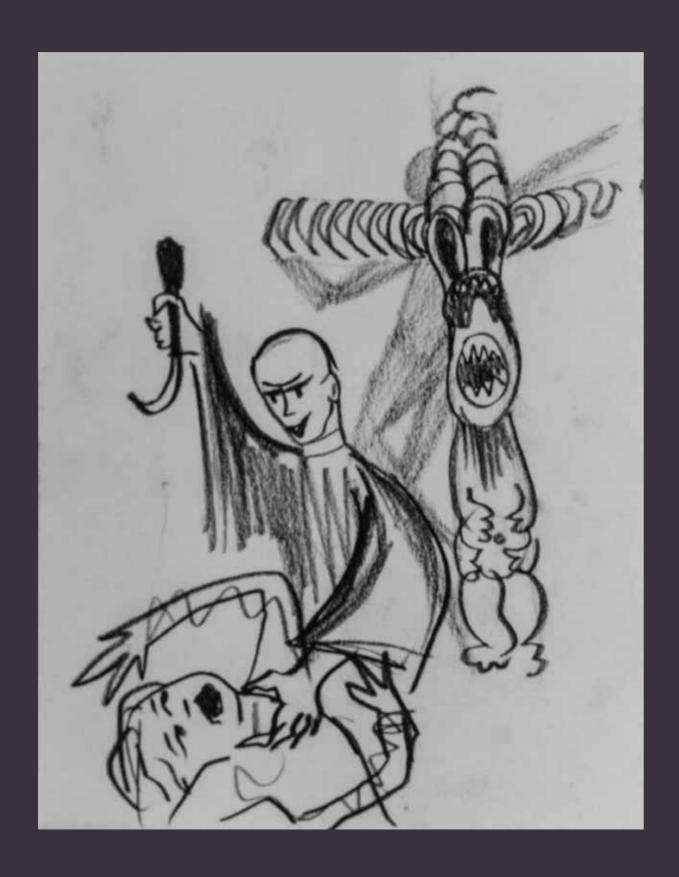
I need his influence to help control her self-destructive urge.

Ingrid places the second sheet of paper on the desk.

"That must be Father Dalton?"

"Yes. He's very kind to me.

I don't know how he finds the time..."



Ingrid turns the page.
"I can't trust him.
While he is blessing me –
With his hand on my head –
I know
He wants to kill me.
I am alone
with this man.
Christ has gone."



The third sheet of paper.

We have a second psychiatrist.

He is in charge of the social group.

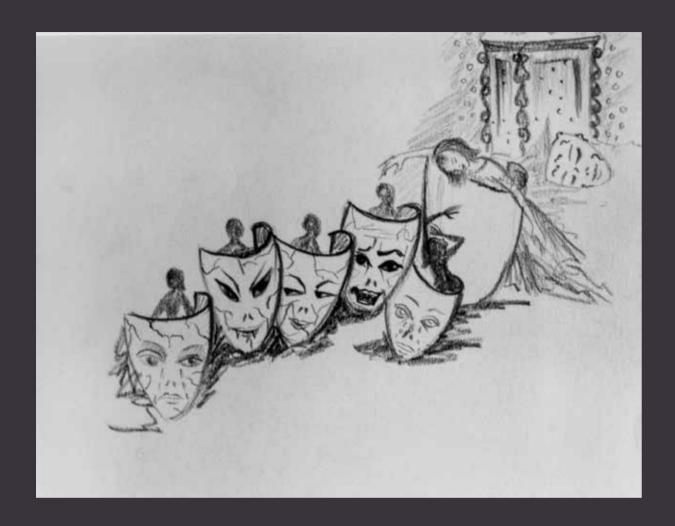
He is part of my endless therapeutic manipulation.

"I see you have drawn both of us."
"He's there at the club.
Talks to me every time I go there."



I turn the drawing over.

"Neither of you really understand.
Oh – you're both trying.
So many questions.
It goes on and on..."
"On and on?"
"The questions go on and on.
And my fear goes on.
And my feeling
that this will end badly
goes on."
"Who's that in your picture Ingrid?"
"That's Death
waiting for me."



Ingrid cuts herself.

I find her staring into a long incision on her thigh.

She has her fingers in the wound. There is blood everywhere.

She is calm. Totally detached.

"What is this?"

With an effort I find my voice.

"That's the fibrous covering of the muscle."

She nods. Curious. Distant.

We drive to casualty in silence.

I understand everything.

And nothing.

I ask myself as many questions as I ask Ingrid.

I explore all the possibilities. Epilepsy. A brain tumour.

Is she an exotic vampire? (her own suggestion). Hysteria.

Schizophrenia.

She has a recurring dream.

Her flat is on fire.

She wakes on a funeral pyre screaming.

Ingrid is in a perpetual state of non-living.

By cutting herself and watching her blood flow, she is reassured of being alive.

Pain confirms this.

It is absent when she cuts herself. This puzzles her. Fire! Yes fire is the real pain.

Her dream envelopes her in this.

And terror!

A large pencil drawing on the desk.

"You're taking away my masks.

You are leaving me nothing.

I don't know what the last mask will look like.

I'm afraid of that..."



The diagnosis is revealed.

Ingrid falls from the narrow ledge of her daily life, into a schizophrenic silence.

There are urgent phone calls.

I am away. I receive the messages when it is all over.

These paintings are on the floor of her flat. The superintendent is at my side. He was the only one aware of the crisis.

"I left her to call for an ambulance.

I was away only a moment.

She wrapped tissue around her hand.

Set fire to herself.

It was terrible."

Many months later, in a mental hospital ward, I sit on the floor with Ingrid.

One by one we relive her paintings. They cover an entire weekend. She is now in the habit of drawing for me.

Between frantic attempts to find me, she paints.

Scraps of paper.

Large sheets of cartridge paper.

A strip of cardboard.

"It happens so suddenly.

People outside are looking up at my flat.

They talk about me.

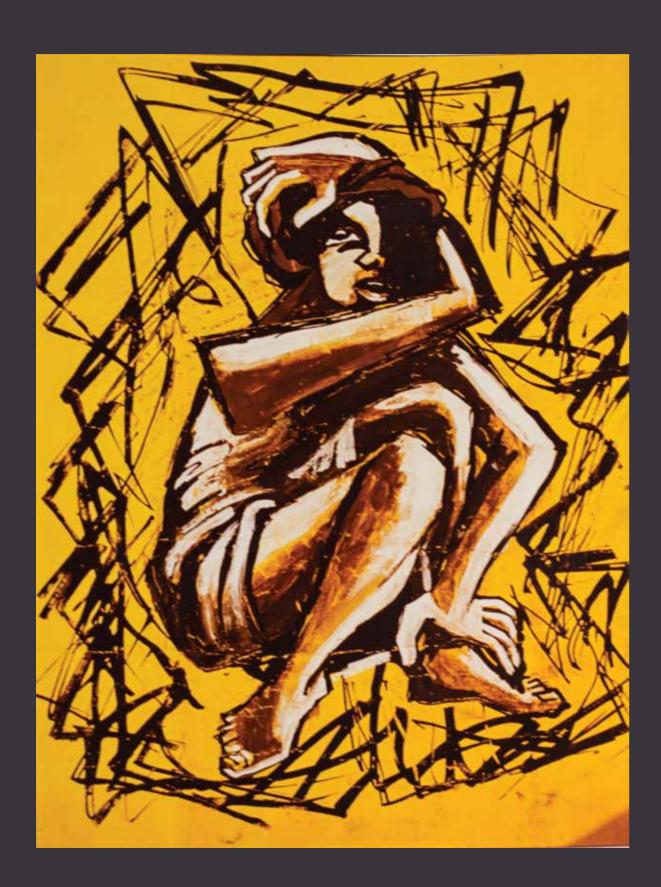
They're going to kill me.

I can hear thousands of voices.

They are getting ready.

I'm not afraid.

I know it must happen..."



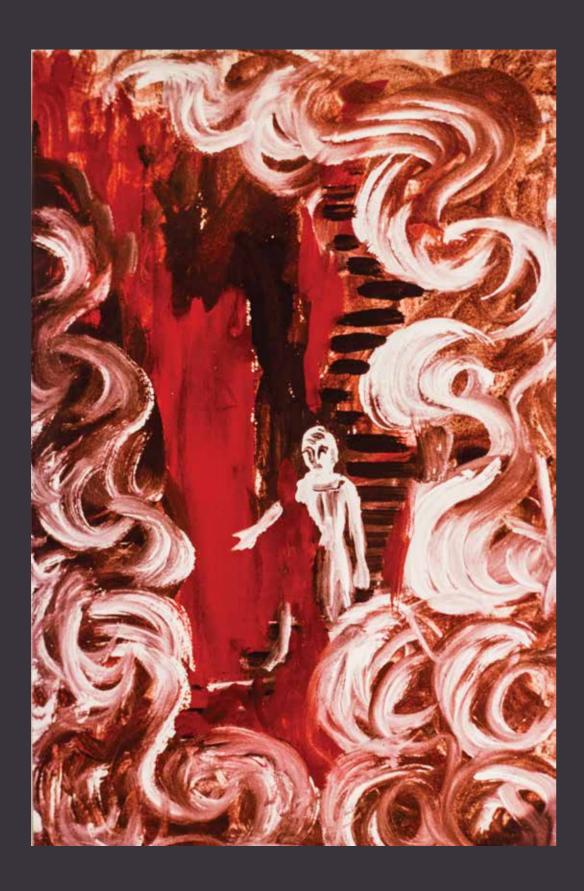
"I try to hide. Yes – There was that moment, It was quiet when I curled up..."



"That
was awful.
It was also beautiful.
It came and went –
again and again.
I was floating away."



"I think I took my clothes off.
I'm not sure if I cut myself.
I know there was a voice calling me.
When I answered
my own voice was also outside me ..."



"The picture is like a dream. I have no memory painting it."

"I understand you tried to burn your hand."

"Yes but that was in the dream..."



"I was on fire."

I arrive at the hospital. Ingrid is in the admission ward. She is walking with a nurse. They have their backs to me. She stands erect. Her gait is awkward. Uncertain. They reach a chair. The nurse helps her sit. There is only silence.

Ingrid appeared to recover. During this all too brief of a remission, she returned to her parents in France. My last letter from Ingrid was from a mental hospital in Paris.

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Afterword

The 'expressionist movement' in art really began somewhere at the beginning of time. We are in a cave. Someone is painting an animal on the stone wall. He is the shaman of the small group of hunters. The animal is part of the mystical survival of their precarious lives. A small child has been watching. Perhaps actually helping grind the ochre into a brownish-yellow paint. Their hands are naturally soiled with pigment. A hand is pressed against the cool rock face. A magical imprint of the hand appears. The child is overawed. The very essence of this child is there on the wall. The entire world of 'expressionism' is born.

To hunt an animal, you must establish a special relationship with that animal. You have to 'hook into it' with your mind. A unique bond is created.

"I, the hunter, am looking for you. You will be there because I have already conjured you up..."

To do this, you must be able to visualise the animal. Better still, draw the animal. Each hunter, as he leaves the cave, will pause before the rock face, point his spear or arrow at the animal, and know the animal awaits him. It is certain that many cave drawings are based on this simple magic.

Other paintings tell stories. They document a significant event – a spectacular hunt, an important battle – the endless tribal struggle with their environment. These drawings create a sense of continuity for the tribe – their existence in the overall march of events.

There are a third group of paintings completely different in every way from the others. They are pictures created for the sheer joy of painting. The burning irrepressible need to express an emotion.

"I am filled with life! There are small men and women dancing in my heart. They jump out of my fingers onto the rock wall."

This is the central core of art therapy. Not only is it a valid expression of the patient's feelings at that moment, but it must be a valid 'temperature chart' of the individual's day-to-day status. When viewed over time it should display the entire process of recovery. Or the hidden process of deterioration. It is all there waiting to be revealed. It is with this conviction that these three women were beguiled to use this unique creative 'hot line'.



Bernard Levinson was a graduate of the University of the Witwatersrand. He was the first post-war intake of exservicemen in 1945. He spent several years as a general practitioner in the Western Cape's False Bay area, before he specialised in psychiatry. He practiced in Johannesburg first as a general psychiatrist and for the last thirty years of his working life as a psychiatrist/sexologist. He was the editor of the *South Africa Journal of Sexology* for fifteen years.

This book arose from a time when Bernard had returned as a registrar to Tara Hospital in Johannesburg (at the time a general psychiatric facility for all ages), after attending art therapy workshops in Canada and Europe in the late 1950s. The first art therapy unit in Africa was born! The use of art as a tool, both individually and in groups, worked miraculously and Bernard achieved amazing results. The Renaissance man, both psychiatrist and artist, had given birth! Bernard continued using art therapy as a psychiatrist and sexologist throughout his entire career, until he retired at the age of ninety.