

## **Interview with MCH Art Therapist, Sarah Brodie**

*Sarah Brodie is an art therapist at the MCH who works in the Hematology/Oncology department. Here she talks about her work and some of the children she helps.*

### **What does an art therapist do?**

There are several art therapists working at the Montreal Children's Hospital in different departments. Art therapists use the creative process of art-making to improve the physical, mental, and emotional well-being of individuals.

My work in the hematology/oncology department involves giving patients art material and quiet time to express what they may not be able to speak about--fear, isolation, anger and loss. In art therapy, young cancer patients and their families learn to cope with the emotional stress and trauma associated with their disease and its treatment. The artwork tells stories, and expresses deep feelings. During art therapy sessions, children and adolescents gain a sense of control over their lives during a time when everything seems to be spinning out of control.

The goal is to ensure that each child is emotionally equipped to fight the disease as actively as possible and prepare for the time that he or she is cancer free. Art Therapy begins while the children are hospitalized, and can continue when patients return to school and follow them into recovery, helping them to understand the unique challenges they may face as they grow beyond their cancer experience. In addition to working directly with the children, the art therapist serves as a member of the treatment team, meeting regularly with health care providers to help them understand patients' needs and to learn about the treatment plan so they can help patients understand as well.

### **When did art therapy start at the MCH?**

Art therapy is a long-standing service at the MCH. When I was a student in my Art Therapy Master's degree at Concordia, I spent a year as an intern in outpatient psychiatry, supervised by a team that had integrated the creative arts therapies (drama, art, and music therapy) for a number of years. My position as a part of the Hematology/Oncology team is new - I am the first art therapist in this department, and have been working here since the fall 2006. This year we've been fortunate that the art therapy program has been expanded thanks to funding from the Sarah Cook Foundation.

The art therapy programs at the Montreal Children's Hospital are mostly supported by the Montreal Children's Hospital Foundations. Donations fund art materials and program development.

### **Which patients can benefit from art therapy?**

Lots! I'll speak for the kids I work with: Art therapy is a service available to all patients admitted to the Hematology/Oncology Unit. Usually this means children above three or four years of age, although art materials such as play dough, markers, and finger paints can support the development of pre-school aged children while they stay in the hospital. Since the patients are often in isolation in their hospital rooms, they look forward to the opportunity to play with colour, texture, form; to use their imaginations to travel beyond the confines of the hospital room.

## **What kind of activities do you do with the patients?**

Art therapy can include painting, drawing, collage, sculpture, as well as photography and computer-based image making. Journaling, book making, and mask making are some of the many activities that I have worked on with patients at the hospital. I bring a cart full of different art materials and station it beside the patient's room. In art therapy, we do everything we can to try and make the hospital into an art studio! It's a challenge because everything needs to be sterilized and we often have to work from the hospital bed. I usually make a mess. Art is a "clean" way of getting dirty, something that many children enjoy!

I usually don't come in with a specific idea of what we will do in art therapy. I tell the patient about the materials they can use, and he or she decides how to spend the session, which is about an hour, depending on the day. Patients don't get to make decisions about their medical treatment, so it's important to give every opportunity to be in control.

## **What do parents say about art therapy?**

The parents of the patients I work with in Hematology/Oncology welcome the art therapy. Each patient creates his or her own portfolio where she or he can keep all the artwork and I take care to explain to the families and the patient that the artwork is confidential, and it is up to the patient if he or she wants to show it to others. Often the patients do show the art to families and staff. The parents, and the rest of the medical team, get to see another side of the child through the artwork. Parents also know from experience that art is a natural language of children, and that artwork helps them to express their feelings and ideas. Through observing art making, the art therapist develops an understanding of how the child understands his or her illness, and this leads to important conversations with the patient, and with the families and medical team, too. Parents are often glad to give their children private time to express themselves in art therapy, and sometimes we all work together, which can lead to joyful moments amidst the strain of being in the hospital.

## **What are the benefits of art therapy?**

In the context of cancer treatments, art therapy has important goals: to nurture development, to support emotional expression, and to enhance creativity. I'll say a bit more about each of these. Art Therapist Tracy Council (2002) has written more about this and I've included a reference below.

### **Nurturing Development**

Children who undergo medical treatment may regress to a less mature developmental stage. This is a normal human reaction to severe stress. Working in art therapy meets children where they are and challenges them to grow. A child who has regressed can regain lost ground and begin to communicate his or her wishes, needs, questions and fears in an age-appropriate way.

### **Supporting Emotional Expression**

Young patients must balance the need to express their feelings about the many losses that the diagnosis brings with wanting to please their parents and cooperate with their treatment. A monster made of clay or poured out in paint upon paper is not real. It can be smashed and destroyed, or tamed and nurtured without

harm to the creator. Growth and healing that take place in the imagination nourish and renew the human spirit.

## **The Power of Art**

In a very fundamental way, creative work is tied to our sense of being vital, alive and healthy. Physical illness brings suffering not only in the body, but also in the mind and spirit. Undergoing medical tests and procedures can be dehumanizing, especially for children, who may not be able to understand the healing intent behind the scans, needles and medicines. Art Therapy allows young patients to do creative work within the limitations imposed by their illness, restoring a sense of self and wholeness. Getting well is hard work, and recovery may take a long time. Experiencing oneself as a creator within the treatment setting changes how young patients see themselves: they become active partners in the work of getting well, not just passive patients who can only take medicine and wait.

## **How is art therapy seen in the medical world?**

I'd like to hear this question answered by members of the medical team! From my perspective, other professionals, as well as families who come for medical treatment, are open, curious, and appreciative of art therapy. The doctors and nurses often come in during art therapy sessions and are happy to be introduced to this creative, healthy side of the patient as he or she is making art. I also find that the medical team I work with make important observations about the artwork, since they often know the patient well, and have insight into the links the art may have to the experiences of the patient.

## **How long have you been doing this?**

I am a recent graduate of Concordia's Masters of Arts in Art Therapy. I worked in the community for two years prior to my employment at the MCH, and continue still to work within the school system and privately. I am fortunate to be in a hospital that has the foresight to use the creative arts therapies as a way to help patients cope with illness and hospitalization. I am also fortunate to be a pioneer of medical art therapy in pediatric oncology, thanks to the initiative of the MCH to include art therapy among its services. I have found a supportive cohort of nurses, doctors, music therapists, psychologists, psychiatrists, child life specialists, social workers, pastoral care workers, physiotherapists, occupational therapists, and all of the other people who work to make each patient's experience at the hospital as easy to endure as possible.

## **How do you prepare?**

I make my own art. I read a lot about advancements in the field of art therapy in pediatric oncology, too. But my own art-making keeps me on track with understanding the challenges and experience of creating something out of my imagination and from raw materials.

An example of this is one of my latest projects: Sometimes the patients at the hospital are too sick to make art on their own, but still wish to work in art therapy. I wanted to make images that patients could play with when they don't have much energy. I decided to do a series of silk paintings that patients could use to spread over the hospital bed, and look at, touch, and talk about. I created a series of four large silks, about the size of the front of a washing machine. Each silk represents one of the four elements: earth, water, air, fire. I wanted to have elemental images upon which patients could project their own memories and feelings.

And I wanted vibrant colours and soft textures. Silk painting is also something that can be done from a bed, so if patients desire, they can make their own.

Upcoming projects include an art exhibition of patient's work. I will invite patients to paint work they would like to have shown, which will be an opportunity for the MCH community to recognize the creative abilities of the patients here.

I also hope to continue to write about my experiences working with patients here, to be able to share the resilience that emerges in art making of young people faced with serious disease.

Questions about art therapy services in the MCH Hematology/ Oncology Department can be directed to :

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Further Reading:

For a detailed explanation:

Council, T. (2003). Medical Art Therapy with Children. IN C. Malchiodi (Ed.). Handbook of Art Therapy. Guilford. Pp. 207-219.

Quebec Art Therapy Association

[www.aatq.org](http://www.aatq.org)

The American Art Therapy Association

<http://www.arttherapy.org/>

Arts in Healing Network

<http://www.artheals.org/start.html>