Introduction

In a climate of capitalist control, exercised through education, notions of normality, categorisation, economic structure, inequality and so on, resistance manifests itself in many guises. This discussion concerns the role of art and how artistic expression can challenge dominant constructions of reality; specifically those adhered to by two sometimes remarkably similar institutions, the mental hospital and the school. Within Western societies these institutions are characterised by a structure, function and ideology which is intended to ‘educate’ or ‘cure’ inmates, moving them from invalid categories of ‘negative subject’ into institutional ideas of ‘normality’ and the ‘ideal subject’. Artistic expression is often encouraged in this socialisation process and this is professionally justified through models of ‘art therapy’, ‘art education’ and ‘client-led’ or collaborative art practices.

I propose that it is possible to create a further, anarchist, model which is based on the ‘validation’ (rather than stigmatisation) of the (artistic) viewpoints of those individuals who are constructed as ‘invalid’ by the dominant definitions operating within these institutions. This ‘validation’ model owes something to the grassroots-based community arts movement in Britain during the 1960s and 1970s, which utilised different philosophies about the nature and purpose of ‘art’ in society. It also rests upon the now unfashionable radical psychiatric perspectives of R. D. Laing, Thomas Szasz and others, who perceived mental illness as being created by society rather than being the product of personal problems.

For the sake of brevity I refer to people who have been labelled as mentally ill as ‘the mentally ill’ and young people as ‘children’. These are the ‘categories’ in which people may find themselves at certain times in their life course; they are not realms of being.
Shared ideology, structure and function

Radical feminists and anarchists have often argued that authoritarian structures begin at home with the nuclear family. The voice of authority to be obeyed originates within the family unit, and children learn to obey father, teacher, boss and god. My concern here, however, is with the similarities between the institutions of school and mental health. Schools serve as the gateways to the outside adult world, a place where children learn and become ‘civilised’, that is to say, culturally and socially adept. Schools deliver a complex network of control exercised through hierarchical, disciplinary and educational structures in an attempt to make children conform to adult ideas of ‘ideal’ or ‘normal’ person. The mental health system is a gateway through which one who has diverged from the ‘normal’ can enter ‘ill’ and re-emerge ‘whole’ or ‘normal’. This is done with the aid of mind-altering drugs, electric shock treatment, isolation and other forms of physical coercion. Alternatively, a mental hospital may be the end of the line, the rubbish tip for those people who are seen as being permanently ‘subnormal’.

Mental hospitals and schools share an ideology that there is a ‘normal’ ‘grown-up’ ‘ideal’ being that some people (because of immaturity, incorrect perceptions, ‘illness’ or lack of sufficient education) have not yet achieved. Children and mentally ill people question the authority of the system in that they question the authority of the State that defines ‘normal’ ‘grown-up’ behaviour. They assert an autonomy of action that threatens the State’s authority over ‘normality’. They are not seen as responsible (autonomous) beings that purposely oppose authority, but as ill, confused, uneducated or undeveloped. They are therefore put into programmes of rehabilitation or education.

It is quite appropriate that moral philosophers should group together children and madmen as beings not fully responsible for their actions, for as madmen are thought to lack freedom of choice, so children do not yet possess the power of reason in a developed form. (Wolff, 1998: 12)

Institutional interventions aim to move subjects from undesirable ‘negative subjects’ to mature, normal ‘positive ideal subjects’. Their function is to help people achieve the ‘normality’ goal, and therefore to fit in and function in ‘normal/adult’ society. This is achieved through ‘education’ in the form of classes and/or workshops and ‘cure’ in the form of drugs and therapies. The increasing overlap and interconnected relationship between the two institutions is significant in the shaping of beliefs and attitudes towards notions of normality and the ideal person.

Shared inmate status

The American sociologist Erving Goffman argued that ‘there is a current psychiatric view that the ward system is a kind of social hothouse in which patients
start as social infants and end up, within the year, on convalescent wards as resocialized adults’ (1961: 150). Inmates of schools and mental hospitals also share a status. The work of Goode (1991) demonstrates how ‘retarded’ people, even though biologically adult, can still inhabit the category of child, in that they are considered to have never grown up. This also applies to people who have been labelled ‘mentally ill’: they are considered to be people who, because of their illness, have become like children. Both the mentally ill and children are seen as having inferior, undeveloped, childlike behaviour, often regarded as over-emotional and unable to control the release of emotional discharge.

Western normality encompasses stillness, quietness and politeness and it is ‘normal’ to be non-emotional (whether angry, excessively happy or excessively sad). The ideal adult person is also well-educated and well-mannered. Neither children nor the mentally ill generally have these attributes. Many people labelled as ‘mentally ill’ are originally sectioned for displaying disruptive, ‘unacceptable’ public behaviour; they often have the same chaotic liveliness as children. Children move a lot; they jump around and make a lot of noise; they skip down the street; children approach and befriend strangers, chatting to them on buses and trains; they rarely hide their feelings and openly express opinions about other people’s appearance, moods, disabilities and the like. ‘Mentally ill’ people often show this same open friendliness or lack of inhibition. In a child it is seen as innocence in that ‘they don’t know any better’, or ‘they haven’t learned yet’. In an adult, such behaviour is weird, mad, crazy, scary or ill. People exhibiting such behaviour inhabit a category of ‘negative subject’. Negative subjects are people who have been invalidated, and this, according to David Cooper, is part of a wider and much more systematic process of exclusion that in some circumstances leads to marginalisation, segregation and even extermination (1967: 11).

Erving Goffman, R. D. Laing, Thomas Szasz and Cooper were all pioneers in the anti-psychiatry movement and the Philadelphia Association of the 1960s and 1970s, which aimed to deconstruct the notion of mental illness as personal problem and reposition it as a consequence of social exclusion. However, their theories and experiments somehow became a cul de sac, being never quite disproved but never developed either. Acceptance of their theories would have required a shifting in social and political thinking. By turning an analytical eye on the society that the individual inhabits rather than on individuals themselves, this would have threatened capitalism at its core. Accordingly, the models of mental health that have dominated have tended to be those that emphasise the biological as opposed to the social dimension. Although the work of Laing (1978) and Szasz (1974) continues to be popular amongst students, the mainstream medical psychiatry profession often regards them as heretics. Fortunately, writers in UK publications such as Asylum (founded in 1986),2 and the literature of the radical psychology group, Psychology Politics Resistance (founded in 1994), as well as a few small coalitions of mental health professionals, continue to refer to these perspectives (see Coppock and Hopton, 2000: 88).
The marginalisation of children and the mentally ill entails economic, social and political restrictions and serves as a backdrop to the two institutional systems that house them. Since invalidated persons are economically and socially unproductive, this legitimises their status as property of the institutions; their rights to full legal citizenship is delegated to legitimate ‘owners’ (doctors, teachers, parents and guardians) who decide on their charges’ behalf what is good for them. This reinforces and condones the mistreatment of them as it is done in the guise of upholding the harmony of the rest of the social system.

If the potential exists that you can become an economic producer, everything will be done to ensure that you do. If the reverse is true, ‘you’re not only going to find it difficult to survive, you will confront an attitude of questionability as to whether you should be allowed to’ (Evans, 1994: 93).

**Shared notions of cure/education and resistance/liberation**

The same behavioural models and sanctions are also used to control both children’s and mentally ill people’s conduct. This can be seen through practices such as ‘grounding’, detention and isolation in separate rooms, wards or exclusive spaces for ‘bad’ behaviour, or the giving and taking away of ‘privileges’ such as free movement, belongings, cigarettes, sweets, etc. Both children and the mentally ill are required to explain themselves to a grown-up or a ‘normal’ person if they are thought to have acted inappropriately. They are monitored to see how well they conform to society’s norms. Being subjected to periodical reviews and reports, their behaviour is plotted on charts, and they are continually assessed and tested, while their ‘development’ is reported to their families or those in charge of their affairs.

The restriction of the movement of children in schools is a form of what Merleau-Ponty (1962) terms ‘embodied control’. In mental hospitals freedom of movement is also controlled. Doorways are significant; those who pass through them freely have a higher status. The doors to the staffroom are often shut; you are only allowed in if a staff member says so. Access to your own room is often controlled by staff, as is access to the kitchen and food. You need to gain permission to move around the institution as you do in school and are often not allowed to do so without an escort. Fences erected around mental hospitals are similar to those around schools and prisons.

Since the 1960s, mental health programmes have attempted to be more humane, whether through the use of psychiatric drugs or through an emphasis on helping clients and children to understand the consequences of their ‘maladaptive behaviour’. Despite many institutions advocating client-specific treatment and respect for the individuality of clients, many of the same rationales persist. For instance, schools increasingly play a role in the ‘new’ psychiatric diagnosis of Attention Deficit Disorder and the use of psychiatric drugs such as Ritalin to ‘cure’ the ‘problem’ of lively, rebellious, resisting young people. In the mental
health system education is on the increase, with inmates encouraged, coerced, threatened and sometimes blackmailed into taking part in rehabilitation activities where they are to ‘learn’ how to function in society as ‘normal’ people.

Due to similarities in structure and function of the institutions, shared forms of everyday resistance also emerge. Here a comparison with Scott’s (1985) work on everyday forms of resistance by ‘peasant’ communities is useful. In order to be effective and avoid severe repercussions by landowners, resistance by peasant activists has often had to be low key and not adopt more ‘visible’ hierarchically organised opposition. Inmates in schools and mental hospitals partake in everyday forms of resistance such as purposely spilling drinks, tipping up ashtrays, burning furniture, writing on walls, ignoring instructions from staff, sabotage and disruption of ‘classes’, intentional lateness, making noise and so on. As Fillingham argues, resistance is not perceived by the authorities as a political statement but as uncooperative behaviour: ‘Only acceptance of the power system and its terms will get patients classified as normal, and thus earn their release’ (1993: 147).

Such everyday resistance is common in schools and other institutions, but occasionally ‘low-level’ resistance increases in magnitude and organisation to achieve wider influence. We can gain a sense of excitement and justice from liberating stories such as One flew over the cuckoo’s nest (Kesey, 2003) or the excerpt below:

At a tiny Welsh school on September 5th [1911] a note calling for a strike was passed round from hand to hand. When the culprit was punished by the teacher all his classmates deserted the schoolroom and took to the streets in protest. The next day Liverpool’s schools were hit by strikes, and then Manchester’s. From there a fever spread as far south as Portsmouth, north to Glasgow and Leith; by mid-September at least 62 towns and cities were affected. Throughout the country children of all ages, some as young as three years, went on strike. In Dundee alone, 1500 children were involved. The demands included end to corporal punishment, extra holidays, shorter hours and payment for coming to school. Completely self-organised, with their own methods of communication, the children formed strike committees, picketed and demonstrated, attacked school buildings, and fought battles with strike-breakers and police. (Harper, 1987: 104)

Similarly, despite attempts in many parts of the British media to belittle their significance, thousands of well-informed, organised and determined young people walked out of their schools and colleges and took to the streets across the United Kingdom (and across the world) in March 2003 in protest at the US and UK governments’ war in Iraq.

The role of the arts and the artist – legitimisation of the ‘abnormal’

Many of the aforementioned distinctions between normal and invalid categories of behaviour can also be seen in established perceptions of ‘art’ and how it intersects with everyday life. Understanding how this happens is therefore important
if we want to claim that art can provide an opportunity for liberation. This section looks at how art comes to be categorised in ways that sometimes prevent liberation.

Radical art movements, from Dada, the Surrealists to the Situationist International have constantly emphasised the need to integrate ‘art’ into everyday life, believing that this helps to realise a creative subjectivity. Part of this process, according to these movements, has been to challenge normative categories through different media. By invention and creativity, people have the ability to express things that do not fit into and/or challenge preconceived ‘normative’ categories. This may result in new reflections on their own circumstances with a view to presenting potential solutions to particular problems. Moreover, creativity can also provide more accessible forms of expression and communication than some ‘normative’ methods of artistic production. This can be important for people who are less ‘educated’ or less adept at the manipulation of language, media and ‘high status’ means, which is often the case with the mentally ill, children and working-class people. Creativity therefore often provides useful tools for resistance.

When I refer here to ‘creativity’, I refer to it in the sense of individual expression, in any form or style, and unjudged and unrestricted by the art establishment’s yardstick used to legitimise ‘proper’ art. This is also similar to the Symbolists of the nineteenth century who insisted that poets must be absolutely free to create and use their own forms. More importantly, the guiding principles must be the poet’s own unique, subjective experience. Poetry is best created and understood by allowing the imagination total freedom of interpretation. (Harper, 1987: 70)

To return to the work of Szasz, we can see a legitimisation of the above argument in his analysis of language. He suggests that ‘non-discursive languages do not lend themselves to translation into other idioms, least of all into discursive forms’. Creativity can stand for itself as an expression ‘not necessarily one that yet has meaning’ (Szasz, 1974: 130). He argues for a language that comes before verbal or ‘conscious’ language, calling this lower level of language ‘protolanguage’ (see also Moore, chapter 3, this volume). Protolanguage is the thing that exists before it is interpreted into verbal language, the thing that is not yet named: ‘While it is evidently impossible to speak about something one does not know, it is possible to express, by means of protolanguage, something which is not clearly understood, explicitly known, or socially acknowledged’ (Szasz, 1974: 113). Psychoanalysis may call this the unconscious.

Szasz argues that attempting to communicate with people with ‘hysteria’ or other ‘mental illnesses’ is similar to communicating with people speaking a different language. It is not a bodily disease that can be diagnosed and treated, but rather a linguistic misunderstanding. Therefore looking for a cause, treatment or cure is as nonsensical as looking for a cause, treatment or cure for someone speaking French. It may make sense in some circumstances for a French person to begin to speak English to make communication clearer, but this is about learn-
ing rather than ‘cure’. Although Szasz regards this different language as ‘valid’, he does not suggest, however, that it may be as useful for the English-speaking person to learn French. It is automatically presumed that the patient, child or non-English speaker should learn the ways of the dominant party rather than the dominant party investigating the possibility of learning and understanding those of the subservient party. The use of art as a platform for communication requires each party to communicate using the same language and on a similar level, allowing for the fact that, like any form of communication, art also remains open to interpretation by both producer and consumer.

The mistake that is often made is that we try to ‘interpret’ art into a rational and linguistic form. Art may communicate something emotional and you may only be able to feel it in the same way that music can invoke feeling. Trying to understand it in terms of spoken, written or thinking terms cannot always work because the translation is either not possible or gets misinterpreted in the process. The young child who simply produces a drawing and presents it to the world is creating something anew. However, we often require the child to attach concrete meaning to it so that we can categorise it and, ultimately, restrict it, a point also noted by Clifford Harper in his discussion of the Dadaist movement:

[it] sought to break the shackles . . . that prevent the creation or recognition of freedom in a mind too confused by the absurd contradictions of a modern world – a world where, for example, governments execute criminals for the ‘crime’ of murder but mutually engage in mass slaughter. Dada recognised that these shackles could be broken by allowing chance, irrationality and disorder to develop, and this would reveal the possibilities of a new world, which would itself be one of constant change, of no rules, of constant spontaneous, individual creativity – a world of Art. (1987: 126)

The person categorized as ‘artist’ is perceived differently from the ‘non-artist’; their ‘eccentricity’ is celebrated rather than scorned. The ‘artist’ is allowed or expected to inhabit a space outside the realm of everyday ‘normality’ and thus the category ‘artist’ or ‘art’ enables ‘abnormality’ to exist in the ‘normal’ sphere, legitimised by the categories of weird, fantastical, confrontational. If one can identify or categorise oneself as ‘artist’ or partaking in artistic expression, this changes the diagnosis of madness or the label of ‘uneducated’ or ‘child’ and vice versa: it allows an eccentricity that would otherwise be categorised as ‘mad’, ‘ignorant’, ‘immature’ or ‘abnormal’.

An extremely poignant example of this is one documented by mental health survivor (and now ‘Mad Pride’ activist) Mark Roberts (2000) about his experience working on London buses. He recounts how one day he decided that the number 69 bus should not stop at the poor working-class area of North Woolwich but instead should go into the middle class area of Chingford. After thirty people had boarded, he decided not to stop at any other bus stops but to simply take the passengers (who were mostly on their way to work) straight to Epping Forest just to the north of London. He had noticed how mundane, drab
and monotonous the journey to work and process of the working week had become for these people and decided to do something radical to change it. In effect, this amounted to ‘kidnapping’ thirty passengers. However, if this had been done in the name of art he still may have been questioned or even charged for doing it, but it would have been a sensational piece of performance/public art work that would have projected his career straight into the limelight; a similar case might have existed had it been done for a sensationalist ‘reality TV’ programme as a sociological joke. Unfortunately, Mark Roberts had a history of mental illness, which meant he was immediately charged with kidnapping; he was sectioned and locked into an institution to be treated with a number of damaging psychiatric interventions. His heroic (although it could be argued misguided) act of liberation for people whom he regarded as trapped in an ‘insane’ world of capitalism was swept under the carpet as a shameful and embarrassing episode carried out by a sick and pitiful man.

Under ‘artistic licence’, this incident could be categorised as a valid statement; without this legitimacy, it becomes invalid behavior. Calling actions ‘art’ can liberate and validate their creator’s actions. The same potential for validation exists for children. A child is often seen as daft, stupid, naïve, ignorant, silly, loopy and so on for behaviour that is outside the normal adult ideal. It is harder for children to masquerade as ‘normal’ in the same way that a ‘mad’ adult can because their size exposes them; their ‘invalid’ status is more visible. Young people’s opinions, creations, inventions and ideas are often disregarded as ‘they lack knowledge’ or ‘they have too vivid an imagination’ in the same way that mentally ill people’s are called delusions. A young person thinking they can fly is put down to lack of knowledge of gravity whereas an adult discussing astral projection or a science fiction writer’s character defying gravity is categorised as ‘scientific phenomena’ or ‘creativity’. The child’s status or the mentally ill person’s status warrants their ideas as ‘invalid’, often without prior consideration.

However, children can and have covertly taken part in adult/normal discourse through art. There have been art projects designed specifically to do this by providing young people with a platform and media that cannot be recognised as having been produced by a child.

The Kidspace/SEEK and TELL Project in 1997 at Tidemill school, Deptford, South London involved sixteen 10 to 11-year-olds using photography to represent the world of childhood. Taking cameras into their homes and street-lives they photographed whatever was interesting and important to them. Their work was exhibited in the SEEK and TELL exhibition, an international exhibition including adult artists’ work on the theme of childhood at the APT Gallery in Deptford. Due to the medium of photography and combination of work, it was difficult, if not impossible, to know which work was by an adult and which was by a child. The work therefore was viewed and valued from an equal standpoint of validity and importance. This, however, did not hold true for the catalogue, as artists wrote a statement to go alongside their work, thus exposing their age because of the difference in the written language they used.
The three models of art in institutions – and a fourth one

The aforementioned relationships between official definitions about the perceptions of art and reality are also evident in models used by professionals in existing mental health and educational institutions. These also suffer from many of the weaknesses that I have already identified. Firstly, the so-called ‘Arts Therapy’ model, is a medicalised perspective which sees arts practices as a form of diagnosis and ‘cure’ for the assumed pathologies of mental illness. A second model is that of ‘Arts Education’ whereby the (visiting) artist is seen as a teacher helping participants to ‘develop’ to a higher stage of competence and achievement (within certain parameters). A third, and potentially more useful one is that referred to as the ‘Collaboration’ or ‘Client-led’ model where there is a degree of acceptance of the legitimacy of the perspective of the person identified as a ‘problem’. This is related to my own work which tries to go beyond these definitions and find ways to re-validate those people who have been defined as ‘invalid’ by particular institutions. I have termed this fourth perspective the ‘Validation Model’, which has, I believe, considerable potential to change our way of relating to art and to mental health issues. However, in order to understand where this model might fit into the above schemata, it is important to understand the theory and practice of the original UK community arts movement whose work can be related to anarchism.

The community arts movement

During the early 1960s and 1970s, a new form of arts was developing which was termed ‘community arts’. In Britain, the Association of Community Artists (ACA) was founded by Bruce Birchall, Martin Goodrich and Maggie Pinhorn in 1971 and it became the recognised body that ‘spoke’ for community artists. The ACA’s main aim was to oppose the system of arts funding that they saw as elitist and exclusive to ‘high art’. In response to this movement and because of an increasing number of applications for funding from community artists, the Arts Council set up a ‘Community Arts Working Party’ in 1973, chaired by Professor Harold Baldry, the objective being to determine whether ‘community arts’ was distinguishable as a category and whether the Arts Council would support it. The results of this research (The Baldry Report) prompted the legitimisation of ‘community arts’.

Community artists are distinguishable not by the techniques they use . . . but by their attitude towards the place of their activities in the life of society. Their primary concern is their impact on a community and their relationship with it: by assisting those with whom they make contact to become more aware of their situation and of their own creative powers, and by providing them with the facilities they need to make use of their abilities, they hope to widen and deepen the sensibilities of the community in which they work and so to enrich its existence. To a varying degree they see this as a means of change, whether psychological, social or
political, within the community . . . [They] differ from practitioners of the more established arts in that they are chiefly concerned with a process rather than a finished product; a many-sided process including craft, sport, etc., in which the ‘artistic’ element is variable and often not clearly distinguishable from the rest. (Arts Council of Great Britain, 1974: 7)

Although community artists may object to this definition of themselves as people who want to ‘increase awareness’, it had an impact of legitimacy within the art world, albeit a distorted one of ‘lower class’ art.

‘Community arts’ was a movement in its own right before this ‘legitimisation’ by ‘the Establishment’. Unfortunately, a theoretical framework for community arts practice was never developed, causing it to be somewhat disjointed and open to misinterpretation. In 1984, Kelly attempted to provide such a framework:

Community arts were woven, then, from three separate strands. Firstly there was the passionate interest in creating new and liberatory form of expression, which the Arts Labs both served and fuelled. Secondly there was the movement by groups of fine artists out of the galleries and into the streets. Thirdly there was the emergence of a new kind of political activist who believed that creativity was an essential tool in any kind of radical struggle. (at p. 11)

The community arts emphasis might have been on deprivation – financial, cultural, environmental or educational – but much of this was lost in the subsequent scramble by the artists to make money from their individual enterprises. The steady impact of the previously aloof ‘fine art’ community also had an effect, as funding originally intended for community artists tended to be diluted by these more prestigious ‘professional artists’. Thus community artists advocating social change become supplanted by ‘artists working in the community’.

Between the 1970s and 1990s, outreach projects from museums, galleries and various other institutions developed upon the initiatives of community artists. In the 1990 report Arts and communities: the report of the national inquiry into arts and the community by the Community Development Foundation (CDF) it was stated that, due to the expansion of community arts, it was no longer appropriate to call it community arts and it would have to be renamed ‘Arts in the Community’. The CDF make this distinction clear:

Arts in the Community means those arts which emanate from or are created to serve people in a particular locality or community of interest. Thus it includes both community arts and other streams of development, such as: independent arts initiatives by local residents; arts in adult education; outreach work by professional companies; the arts aspects of social and religious life; the arts of cultural minorities; initiatives by arts entrepreneurs; arts initiatives by public authorities, including health, education, social services, prisons. (CDF, 1992: 87)

With the development of ‘Arts in the Community’, community arts has become institutionalised, controlled via funding organisations, government, arts boards, local authorities, health authorities, business sponsors, trusts, foundations, social organisations. There is also a rapidly expanding network of
community arts organisations who are affiliated to and restricted by these same funding bodies and attached legalities. It is becoming increasingly difficult for individual community artists to gain funding for projects due to sponsors requiring that funding be managed by an arts organisation. Control is therefore moving from the hands of the artists as individual collaborating practitioners into the hands of the managerial committees of arts organisations. These committees are often made up of directors, managers and administrative staff who do not actually practise in the community themselves and so are often divorced from the needs and wants of the actual individuals within a community. They are kept busy justifying outputs in terms of numbers and product to their funders so as to keep any sort of arts in the community alive and of course to protect their own jobs. Unfortunately it often leads to them working in direct conflict to the process and humanistic base of ‘community arts’.

In these processes the issue of class is never far from the surface. It seems no coincidence therefore that ‘fine artists’ are usually middle-class, coming from the academic positions operating from ‘top down’, whereas community artists were/are usually working-class activists working from the ‘bottom up’:

The institutions of the art world are built upon and are riddled with class bigotry, a prejudice often reciprocated. This duality becomes a situation of dominance and subordination where those in power can materially validate certain art forms according to subsidy whilst devaluing others . . . It has been easy for art world supremacists to dismiss whole areas of practice as ‘social art’ – seen as decoration, community work, art therapy or play. That it is not considered equal to those other ‘proper’ art forms which cater to a minority of tastes and to which the majority of funding goes, deflects any challenges to the mainstream. (Dickson, 1995: 11)

This is the fundamental problem with art as education in the community or in education projects. Non-dominant categories of people (be they the socially excluded poor, the mentally ill or children) are to be educated in the aesthetics and art etiquette or the history and culture of the ‘Fine Arts’: the ‘community’ is to be educated and enlightened in the arts of the élite.

However, Nicholas Lowe, a community artist, talks about work he did in partnership with another community artist, Alan McLean:

We had both been collaborating with individuals who had no formal arts training. We had both understood that the changes our collaborators were going through were enhanced with an increase in their self-esteem. Also their developing practical understanding of our working processes meant they had begun to show their potential as autonomous visual artists. It was clear from this point that our work was not simply a matter of education but that it had as much to do with approaching our collaborators as equal human beings with valuable skills and experience to offer. (cited in Dickson, 1995: 85)

The original aims of the community arts movement have become lost as other imperatives have taken over: dependence on state funding grew, community artists learned to fit their projects into the funding applications, highlighting the
funders’ aims and glossing over their own. As there was no real framework to look at, subsequent community artists used these proposals, reports and documents as examples of community art, with the result that the initial impetus of social change became lost. Community arts became defined by the funding agencies. The activism of community art changed into helping disadvantaged people to become enlightened about ‘proper’ art taught by people who were experts in it. This process of institutionalisation of community arts has continued to grow, with an increasing number of universities developing modules and courses in ‘community arts’.

The failure of ‘community arts’ as a radical movement could be said to be due to never having a theoretical framework or analysis with which to measure itself. Even so, the impact of community arts that many artists still desire is one of social change and they are debating what role they play. I hope that this movement develops a theoretical framework that defines different practices within the community (such as education, therapy, collaboration, facilitation, and validation) so that community art can reemerge as a movement for social change. The Validation Model outlined in this chapter attempts to do this.

The Validation Model

The Validation Model of arts education encourages a ‘stepping out’ of preconceived positions, a process which, whilst occurring at institutional sites, is in conflict with their tendential roles in producing ‘ideal selves’ through ‘cure’ and ‘educational development’. The role of the artist in the Validation Model is not to ‘teach’ art or to analyse somebody’s ‘illness’ but to inspire and encourage people to express their own inherent creativity. This also serves to educate staff and outsiders about the opinions, ideas, lives, interests and criticisms of the client group, thus inverting the ‘top-down’ process of ‘education’ and the perceptions of ‘illness’, ‘cure’ and ‘normality’. It makes the arts education process one of shared experience and shared learning. Part of experiencing the art of ‘outsiders’ (such as that of children and the mentally ill) requires a letting-go of the idea that there is a right or ‘normal’ way of being.

I propose that, through such processes, creativity itself can become a neutral space, an antidote, an inverted space filled with obscured or non-existent normality; its function can be to cancel and suck out preconceived ideas of what we are. Arts practices can thus function in a deconstructive and liberating way, breaking down narrow prescriptions and challenging received and categorical ideas about what people are or should be.

The Validation Model, by focusing on the inmates of institutions, does go towards validating them. However, the model is limited due to the restriction of the category that they continue to inhabit. Real Validation may only begin when we turn the focus from the ‘ill’ or the ‘child’ as invalidated beings in need of help to the ‘confused’ society that excludes them. This means encouraging people to step out of their preconceived positions, widen their perspectives, deconstruct
restrictive categories, allow statements, or expressions or validations of what we all are in our own terms, rather than as staging posts in a journey mapped out for us by other (expert) people.

Conclusion

I have suggested that institutions play a significant part in the constitution of self and others through shared notions of normality and ideal person, with particular reference to institutions for the ‘mentally ill’ and schools. (Re)categorisation of ‘art’ and ‘artists’ can legitimise the breakdown of restrictive and negative categories and, in the process, go towards validating if not the person, certainly the work and expressions of the artist who has been invalidated as ‘mentally ill’ or ‘child’.

The activities and ambitions of the community arts movement in Britain in the 1960s and 1970s up to the present day provided us with an important lesson for developing genuinely liberatory arts practices, as well as lessons in the dangers of institutionalisation, or removal, of projects committed to social change.

Such processes of control also exist in social scientific attempts to translate children’s and mentally ill people’s perceptions into their own analytic categories of ‘other’ or ‘outsider’ rather than trying to understand these different perspectives. Instead of trying to understand the opinions of ‘invalidated’ persons from the ‘valid’ person’s perspectives and communicating through ‘valid’ media, ‘validated’ persons must learn to look at and experience the world through the eyes of the ‘invalid’, through media that reduce misinterpretation by their immediacy and accessibility to both parties.

Children partake in the production of art and creativity throughout their daily lives. As ‘sane’ ‘normal’ ‘adults’, we have often simply forgotten how to recognise it and so we forget the importance of such things as listening to music, dancing down the street, climbing trees, staring at clouds, whistling with grass, picking scabs and popping tar bubbles with our toes. I propose that art has the potential to enable children and the mentally ill to express and communicate their experiences, whilst validating their perceptions on their own terms; it can also remind us of what we have forgotten in the process of becoming ‘normal’ ‘adults’.

Notes

1 It is only with some qualification that I place my own political position within this milieu, but do so because I feel that my attitude towards authority, self-responsibility and autonomy warrants the broad label ‘anarchist’.

2 Editorial note: this publication now has a website: www.asylumonline.net/about.htm.
3 By ‘peasant’, Scott refers to people of ‘lower class status’, presumably of rural origin; again this is not a realm of being.

4 See Willis’s chapter entitled ‘Grounded aesthetics’ in Willis (1990).