Between art therapy and disability aesthetics: A sociological approach for understanding the intersection between art practice and disability discourse

ABSTRACT

What emerges as art and how it is categorised are parts of a collective process taking place in art worlds and involving a wide array of social actors. In this paper, the relation between four ways of framing the intersection of disability and art is discussed. These frames are art therapy, outsider art, disability art, and disability aesthetics. The paper suggests the frames and the way they relate to each other as important discourses in organising the relation between disability and art. The discourses’ relevance is demonstrated by discussing three cases of art practice among disabled people. The discussion of the cases demonstrates the importance of including more than one of the four identified discourses when analysing art practice involving disability. The concluding part discusses how the intersections of disability and art can be more closely linked to the mainstream art world through the concept of social practice art.

KEYWORDS

disability art, outsider art, disability aesthetics, art therapy, sociology, social practice art

Introduction

In the social organization of art production in the intersection of disability and art, several frameworks are used. One of these frameworks is disability art. Here, disabled artists identify with the disability activist movement. The disability experience is interpreted in the framework of the social model of disability and discriminating practices are ridiculed. Disabled audience members are important, and the advancement of disability pride is in the forefront (Swain and French 2000; Barnes and Mercerer 2010, 207). Newsinger and Green (2016) divide the field of art and disability into two categories: art as a therapeutic tool and disability arts. In an interview study involving artists affiliated with the disability art movement, two additional categories organising the intersection of art and disability were referred to. The artists interviewed made it clear that they did not want to be affiliated with outsider art. What they wanted to do was to work
their way towards the mainstream art world where the concept of disability aesthetics is made relevant (Solvang 2012). In total, four discourses seem to be important to the relation between art and disability: art therapy, outsider art, disability art and disability aesthetics.

Lacking are a critical overview of the four discourses and a discussion of their relevance in furthering the understanding of the unruly field of disability and art. This paper will first give an overview of some tenets of the discourses. Second, the paper presents three cases of practice involving art and disability. The interpretation of the cases will demonstrate how they are not possible to subsume under one discourse. Several discourses must be considered when understanding art and disability practice. The paper concludes by illuminating the pros and cons of systematising frameworks. The systematising of discourses, as done in this paper, can tell us about the past and the present, how our understandings about a phenomenon, here disability and art, have been and are organised. However, to further the understanding of disability and art, we must relate to the wide variety of cases where art and disability intersect. The established discourses are helpful in understanding how the practices are institutionally grounded, but they must be transgressed to accommodate recent trends in the mainstream art world. Here, social practice art is an important concept.

**Four discourses of art and disability**

The main point in Becker’s institutional theory of art is to bring in a wide set of actors in understanding how art is created (Becker 2008). The starting point is the individual artist and the creative process orchestrated by the artist. Then there are the framework-producing professionals, ranging from manufacturers of brushes, museum curators, and gallery owners to support personnel such as art teachers and personal assistants. In addition, the intersection of disability and art includes health care professionals and activists from the disability movement as important social actors. Third, among the actors in art worlds are the audiences and the collectors, the consumers of art production. Art audiences are positioned in particular social strata where the highly educated middle class plays an important role (Bourdieu 1993, 1996). Artists may address different audiences. One example is artists representing an activist group, such as feminists, gays and lesbians, or disabled people. Their work can be interpreted as feminist art, queer art, or disability art. Fourth, government authorities develop cultural policies by funding museums and providing stipends allowing artists to work without a steady income from art production. Governments have shifting priorities in their cultural policies; one example is the promotion of diversity among both artists and audiences, typically addressing participation by minorities in the field of art.

The relations between the actors in Becker’s theoretical concept are structured by differences in power. The relations are also part of a diverse set of traditions in the understanding of art and other social categories such as disability. Studying power relations and sociocultural practices
embedded in language use is central to discourse analysis (Grue 2016). Hence, I would like to address the intersections of art and disability as discourses. The intersections are discourses in the way that they are modes of ordering life with disability and modes of ordering engagement with art practice. The way that the relation between art and disability is ordered is formed by ideas about what disability is and how it must be approached: as an arena for health professional work or as an arena for identifying as disabled and fighting oppression, to name two prominent examples. Regarding disability, an important dividing line can be found between medical and rehabilitative approaches on the one hand, and social approaches applying minority and disadvantage as important concepts, on the other hand (Hammel 2006). In art, a recent dividing line can be found between the traditional approach of producing art objects and the innovative spaces established by the creation of social practices as art (Bourriaud 2002). In the four separate discourses to be outlined, such diversities in the understanding of disability-related art practice are brought into play, producing distinct amalgams of disability and art.

**Art therapy**

The relation between art and health covers a broad landscape. One way art is implemented in health is through aesthetic improvements in hospital settings (Dose 2006). Another way is through interpreting illness in the medical humanities literature. Art can also be part of community initiatives to improve health and to encourage shifts to healthier lifestyles (Sardu et al. 2012). Finally, art is part of therapies aiming to improve health and well-being among individuals or small groups (Dose 2006; Clift et al. 2009). Given the ambition of identifying key discourses of art practice by people with disabilities, art therapy stands out as a prime category to address from the broad field of art and health.

The therapeutic ambitions of art therapy are twofold: First, to use art practice as a component in treating a medical condition. A prominent group of practices aims to bring out suppressed feelings by using psychotherapeutic theories. Second, to provide disabled people with a valued social practice by using social work theory (Argyle 2003). In the field of disability, the second approach is most important. In a social work framework, community art is the major category in UK discourses about disability and art therapy. Community art began in the 1960s. Since then artists have worked with disadvantaged people in local community settings. Drug addicts, prison inmates, school pupils with disabilities, and people with mental health issues have been primary target groups. The art projects typically take place outside the local institutions of art such as museums, theatres, and concert halls. The primary aim is neither the produced artwork, nor better access to the arts, but rather the social process of creating art. The process is believed to be empowering and to contribute to self-esteem and recognition in the community (Hamilton, Hinks, and Petticrew 2003).
A typical case study of art therapy in the community art setting is Heenan’s study of an art therapy module in a recovery programme for people with health issues (Heenan 2006). The primary concern of the module is not the finished artwork, but the therapeutic value of producing it. The type of art produced is not even mentioned in Heenan’s report of how the module was experienced. She concludes that the art module on the positive side led to heightened self-esteem, provided a safe space for personal development, and was experienced as empowering. On the negative side, she points out that the effect of the module was limited by its nature as an isolated island of hope in a social context of prejudice and discrimination. This negative side may be due to the design where interaction with the local community was not an issue. In other projects of community art, typically music and theatre, performances addressing the public are emphasized. The effect is to at least challenge the images of disabled people among the general public (Ineland and Sauer 2007).

Art therapy has been one way for some aspiring artists with disabilities to access training and instruction. The therapeutic frame has also made it possible for some people living on welfare benefits to establish professional careers (Solvang 2012). This is a positive side, but when disability comes into art discourse, the prevailing societal dominance of the medical model of disability comes into play. The medical model, whereby the artist is a patient and the instructor the therapist, has to some extent framed the practices subsumed under the label of art therapy. There is a lurking danger of medicalization present. Art therapy itself is not a problem in such a critical perspective, but for the artist struggling for recognition in the cultural field, being perceived as a patient seems like discrimination. A comparable critical stance can be taken towards the second framing of the intersection of art and disability: outsider art.

Outsider art

The British writer Roger Cardinal coined the term ‘outsider art’ in 1972 (Rhodes 2000). Artist outsiders are defined by their difference from their audience and by their mental and social dysfunctionalities regarding prevailing standards of normal behaviour. The historical starting point of outsider art is the collecting and curatorial work of art historian and psychiatrist Hans Prinzhorn in the early 1900s. He established a collection of artworks by inmates of psychiatric institutions where he served as a doctor and published a book about the collection, Bildnerei des Geisteskranken (Artistry of the Mentally Ill). His collection became an important reference for the French artist Jean Dubuffet. In the 1940s Dubuffet developed the concept of art brut (raw art), of which works from the Prinzhorn collection were examples. With the concept of art brut and the accompanying art practice, Dubuffet added his voice to artists such as Pablo Picasso and Paul Klee in challenging the dry modernism of contemporary art.

People with mental disabilities have kept a prominent place in the field of outsider art, together with mavericks, folk artists, and naïve artists (Rhodes 2000; Becker 2008). One of the stars of
outsider art is Judith Scott, a woman with mental impairment who lived the most productive part of her life at the Creative Growth Art Centre in Oakland, California. Another important reference are the Gugging artists. The Austrian psychiatrist Leo Navratil founded in the 1980s a hospital ward named The Artists’ House at the Gugging Hospital in Vienna. He worked on ideas of art therapies not framed by rehabilitative goals, resocialisation and striving for normality. He claimed that

The creative efforts of the artist-patients thrive precisely because of their deviation from the norm, drawing sustenance from those very psychological conditions which psychiatry ordinarily attempts to eliminate. In the Artists’ House the hospital is not preparing patients to re-enter society in the role that once was theirs, but rather offering them a new social identity (Navratil cited in Rhoades 2000, 96).

The ideas of Navratil were furthered by his successors and the hospital ward is still operating as the Art Brut Centre Gugging. This and other institutional practices such as the Creative Growth Art Centre keep mental disability as a site for artistic activity valued in the outsider art discourse.

Jean Debuffet used expressions such as ‘burning with tension’, ‘uncurbed invention’, and ‘complete liberty’ to describe the quality he saw in what he labelled art brut (Tuchman 1992, 11). The art historian Maurice Tuchman identifies the qualities of outsider art in a similar vein when he points out that the ‘bold, elemental, figurative expressiveness characteristic of much twentieth-century art is due in part to the appreciation and influence of the art of compulsive visionaries’ (1992, 11). Tuchman elaborates by citing the artist Andy Nasisse, who points to outsider art as creating ‘a feeling like the work came through the artist than from them’ (1992, 13). Authenticity is a keyword in assessing value to the art produced, being different and on the outside of the art world is the dominant social role, and appreciation from collectors and parts of the conventional art world is the primary social relation. A magazine, Raw Vision, has been published since 1989 and caters to the collectors and other connoisseurs of outsider art.

Disability art

Disability art is art work informed by the disability experience and created by disabled people. It emerged out of disabled people’s social movements in the United States and the United Kingdom in the early 1980s. There, cultural expressions became part of an ongoing effort by disabled people to gain unity and pride. As a minority art form, disability art is formed by organizations publishing magazines, organizing festivals, and in recent years, managing websites. A number of widely recognized professional artists are active in institutionalizing disability art. In the disability community, disability art is perceived as a powerful force in expressing the disability experience. Oppression and discrimination are combated through identification with the disability movement and with the struggle for equality (Masefield 2006; Solvang 2012).
The strong definition of disability art points out that it is a collective activity where disabled people’s artwork addresses a disabled audience. This definition creates an important resonance space most strongly felt in art forms performed before live audiences where the high number of disabled people present generates a social dynamic important to disability identification (Sutherland 2008). A weaker definition of disability art emphasizes the importance of disability art in creating a possible positive cultural conception of disability (Barnes and Mercer 2010, 207). The weaker definition suggests that disability art is the first sign of a post-tragedy disability culture (Hevey in Brandon and Elliott 2008). Thereby the weaker definition indicates that a positive disability identity is fostered by disability art. Introducing such positive elements in the understanding of disability is certainly also intended to broaden the mainstream society’s understanding of disability as well, not only to strengthen the political disability movement.

In an interview study among disability art–affiliated artists it is argued that disability art has developed in two phases (Solvang 2012). The first phase is closely related to the emerging disability rights movement in the 1980s when the strong definition prevailed. The idea of the present situation as a second phase of disability art is characterized by artists wanting to perform and to exhibit for a mainstream audience, and by a combination of disability issues and non-disability issues. The practitioners of the second phase challenge the social-model-inspired regime of truth where disability is primarily about social oppression and challenging discriminating attitudes toward disabled people. They take the discourse of disability art in a direction where the aesthetic potentials pertaining to disability in its broadest sense are explored. A main challenge for those involved in this endeavour seems to be to somehow move disability art out of the ghetto and into the mainstream, not leaving behind the spirit of anti-discrimination.

**Disability aesthetics**

From the history of disability and art, we find such examples as Vincent van Gogh portraying himself with his ear cut off, an incident said to be caused by his mental illness. Frida Kahlo portrays herself in poses where a corset is visible and the experience of severe pain is implied. The work of these two famous artists is argued as impossible to include in the framework of disability art. What they do does not represent a ‘gesture of solidarity’, and Kahlo is said to be have been a drama queen posing as a celebrity and unable to move away from a personal tragedy model of disability (Sutherland 2008).

Sutherland seems to be right in his rejection of van Gogh and Kahlo as disability art practitioners. Disability awareness and disability political movements did not exist in their time. But both artists are recognized as important to disability art practice. They are identified as ancestors and as sources of inspiration for artists positioned in the disability art movement (Solvang 2012). The position van Gogh and Kahlo have gained as sources of inspiration and as historical antecedents point to the importance of disability aesthetics. This is the fourth discourse organizing the
intersection of disability and art. The work of Kahlo and van Gogh is interpreted as disability relevant. Without doubt, van Gogh does something radical in his time by portraying with such visual clarity the scar of his mental challenges.

The concept of disability aesthetics is developed from the position of the art historian and the curator. It is a framework for reconsidering the history of art and for giving value to disability in the aesthetic qualities assigned to works of art. The concept of disability aesthetics is meant to heighten awareness that disability is important to the development of modern art. This heightening takes place both as an aesthetic process and as the opening of a social space for disability. Aesthetically, disability contributes to the imagination of the human condition. Disability reminds the art spectator of the vulnerable body and of human violence. It also points out the possibility of a more inclusive and realistic conception of human life (Abrams 2014). Socially, disability aesthetics creates a space for disabled subjects and disabled artists in the mainstream world of high art. Disability as a cause for devaluation is not removed, but disability is given frameworks for re-imagination (Siebers 2010, 3, 101).

An intriguing example of bringing disability issues into mainstream art is the position of non-disabled artists dealing with disability issues. One example is the work of the British visual artist Marc Quinn. His well-known sculpture of the disabled artist Allison Lapper was displayed on a prominent plinth in central London for several months in 2006. Allison Lapper has no upper limbs and is depicted as pregnant. The sculpture is obviously referring to the classic sculpture tradition where upper limbs often are lacking. Such sculptures are seen as imaginations of bodily beauty, but by Allison Lapper we are reminded that the classic tradition also can be perceived as representing disability. Marc Quinn has made and exhibited sculptures of other disabled artists with easily recognizable physical disabilities, such as the actor and entertainer Mat Fraser and the performance artist Catherine Long. Quinn’s critical engagement with disabled people, the history of art, and the public presence of the body through the medium of sculpture seems well attuned to the conception of disability aesthetics.

**Summing up**

The outlined framework of four discourses of art practice and disability establishes a broad picture of how art and art practice are to be understood in the institutional perspective as introduced by Becker (2008). In Table 1, the institutional logics and the social agents in the outlined discourses of art and disability are systematised to establish an overview.

(Table 1 approximately here)
The blurred borders

The discourses introduced are not aimed at creating four frameworks for interpretation where an art practice shall be subsumed under one of them. On the contrary, more than one of the discourses are often present in art practice involving disability. To demonstrate this presence, three cases are introduced. The first is the Finnish punk band Pertti Kurikan Nimipäivät (PKN) whose story and activity are available through the documentary film *The Punk Syndrome* (Kärkkäinen and Passi 2012) and interviews and performances accessible on YouTube. According to the Wikipedia article on the band, they disbanded in December 2016 when guitarist Pertti Kurikka turned 60 years old and retired from playing punk rock (accessed September 29 2017). The second case is an autobiographical text by Anne McDonald (n.d.), an Australian activist addressing the challenges of living with speech impairment. The third is a well-researched case of art practice, run by art professionals for a group of mentally disabled people in the frame of the Swedish welfare state (Ineland and Sauer 2007). Through the brief case discussions, the aim is to demonstrate how bringing in more than one of the outlined discourses can contribute to a deepened understanding of art practices involving disability.

The documentary film and additional material from the punk band is chosen because they demonstrate how including all four discourses can contribute to a deepened understanding of what is taking place in current art practice. The text about speech impairment is chosen to demonstrate how relating to the diverse set of discourses that organises art and disability can contribute to a better understanding of disability activism that uses artistic expressions. Finally, the social work study is chosen to demonstrate the applicability of the perspective when summing up previous empirical studies addressing issues of disability and art and introducing the relevance of social practice art in understanding what the intersection between disability and art accentuates.

Punk rock

The Finnish punk band Pertti Kurikan Nimipäivät (PKN) emerged out of a therapeutic framework. A social worker saw the talent of the guitarist in the band and made it possible for him to nourish his talent (Kärkkäinen and Passi 2012). It may seem impossible for people with disability to join a band with non-disabled people, comparable to the challenges experienced by many girl rock performers when trying to join male bands. Many girls have negotiated the male dominance by forming all-girl bands. In the case of PKN, a similar solution was found. In the supported living setting where the guitarist lived, three people with mental disabilities were recruited as band members with the social worker’s help. The social worker’s role, the all-disability line-up, and the supported living context set the scene for an art therapy approach in understanding how PKN emerged as a possibility for the guitarist and his bandmates. However, other discourses are present as well. The lyrics written by the singer address issues of discomfort
in supported living. In the expressive style of punk rock vocals, he rages against the regulations of daily life he faces because of his disability. Many disability activist commentators on the band’s success highlight the disability awareness that comes as a result. Being interpreted in an awareness discourse, PKN is clearly leaning on the disability art discourse.

How the discourses of outsider art and disability aesthetics apply to PKN’s story requires a more probing discussion. The agency of both general and specialist audiences is important and the data are scarce. One well-known process of outsider art appreciation is the grunge rock movement in the 1990s that took inspiration from the imagined purity and authenticity of amateur bands and artists with disabilities. A famous example is Kurt Cobain’s appreciation of the singer-songwriter Daniel Johnston for his direct and unmediated style that is thought to be related to his mental illness. Likewise, it is possible to appreciate the style of PKN as an authentic and uncompromised protest in the punk style. Punk was originally a rebellious art movement, but has in recent years been commercialised.

In the discourse of disability aesthetics one must ask how disability works in the artistic context of the band’s activities. One question is how the disability issue is present in the band, both by the visual presence of the band where band members bear some easily identifiable marks of mental disability, and by the subject matter of their lyrics. An interesting case for such an analysis is their participation in the Eurovision Song Contest where they represented Finland in the semi-finals in Austria in May 2015. The song they performed was titled ‘Aina mun pitää’ (‘I always have to’). The lyrics consist of a list of things the singer must do in his daily life. He must take care of daily practicalities such as doing the dishes and taking a shower. He also must relate to healthy activities such as eating low-fat food, drinking non-sugar beverages, and going to the doctor, as well as to regulations of daily life in the form of not drinking alcohol, not having unrestricted access to recreational use of the computer, and not being able to watching television when he wants to. The lyrics points to everyday frustrations known to everybody, and healthy nutrition is part of the biopowers represented by the public health policies aiming to have all inhabitants striving for healthy lifestyles. The regulations of the group home setting are indicated by the denial of (unlimited) access to recreational use of computers and TVs, and the attendance to personal hygiene. Furthermore, not only the disabled adults under the authority and guidance of assisted living professionals, but also children under the authority and guidance of their parents, experience such regulations as listed in the lyrics. In sum, the effect is that the borders between the regulated life of the mentally disabled and the regulated life of the ordinary citizen are blurred. PKN members live under the authority of the group home and we all live under a comparable authority imposed upon us by government bodies, most notably by public health authorities. The possibility of general application places the song lyrics at the core of what disability aesthetics represents. Bringing in disability gives a certain value to the artwork that is acknowledged by all audiences.
Slow living

The second case I would like to discuss involves a text by the Australian disability activist and author Anne McDonald (Kuppers 2014, 51). The text balances the political and the poetic. McDonald was an experienced writer, but did not identify as an artist. My reason for bringing in this text is to demonstrate how the fourfold set of disability and art discourses is important for the understanding of what takes place in the much-populated borderland of political and literary writing.

The title of the text is *Crip Time*. It is available on the website of the centre of speech therapy that bears McDonald’s name (McDonald n.d.).

In the second paragraph, Anne McDonald introduces the image of a slow world:

> Imagine a world twenty times slower than this – a world where cars travelled at three miles an hour, lifesavers took an hour to chew, a glass of water half an hour to drink. Pissing would take quarter of an hour, lovemaking longer than it does now (which might be a good thing).

What she introduces is living at a pace attuned to her way of speaking. At the end, she brings up the idea of slowness in sex practice as a quality. This point is also made by disability scholars such as Tobin Siebers (2008, 135) and Tom Shakespeare (2000). Among other things, they think the need for planning and for scheduling sexual intercourse is empowering to non-disabled people burdened by the myth of spontaneity as a prerequisite for authentic sex. McDonald’s quality of disability sex refers to a more well-known discourse: the importance of not rushing, but enjoying the state of arousal as long as possible. But more important, the list of examples of slowness in the paragraph can be interpreted as connecting to the recent movements of slow travel, slow food, and celebrating time as a luxury good. McDonald’s way of talking about slowness from a cerebral palsy perspective can be perceived as a form of disability aesthetic, she utilizes the disability to open up a space for reflection about slowness. The impairment side of her life comes later in the text:

> I live life in slow motion. The world I live in is one where my thoughts are as quick as anyone’s, my movements are weak and erratic, and my talk is slower than a snail in quicksand. I have cerebral palsy, I can’t walk or talk, I use an alphabet board, and I communicate at the rate of 450 words an hour compared to your 150 words in a minute – twenty times as slow. A slow world would be my heaven. I am forced to live in your world, a fast hard one. If slow rays flew from me, I would be able to live in this world. I need to speed up, or you need to slow down.

In this paragraph, she introduces the impairment status and the therapeutic dimension by the way she uses a communication assistive device. She follows up by indicating the social model often
applied in disability art by referring to what would be her ideal world. This remains a utopic fantasy, but later in the text she addresses explicit suppression:

For food, too, my time is slower than yours. I take an hour to eat lunch – not an hour to go to the restaurant, order, consume my meal, and chat, but an hour just to eat. I used to live in an institution where I didn’t have an hour. Meals for us were done in your time, or even faster, six minutes per child. If you choked on a mouthful, they stopped your meal and moved on to the next child. Long lunches are now my frequent pleasure; they show me I am free.

Here, the disability art dimension of the text is at its most direct. An important part of her story is the suppression she experienced as a child when institutionalised and labelled unable to learn. This is a major part of her autobiography (Crossley and Molloy 1984) and was important to her public persona in Australia. The text Crip Time effectively uses both disability art and disability aesthetics dimensions to address issues important to disabled people as well as to non-disabled people. McDonald’s stories about her life at the institution are horrific. The level of neglect she and other children suffered is devastating. One may also ask if there is a therapeutic dimension to publishing autobiographical texts giving voice to what you have experienced and getting public recognition for the wrongs done to you. This element is not directly addressable in Crip Time, but in McDonald’s co-authored biography, the therapeutic element may be significant. In the epilogue to the 2010 edition, she sums up the experiences in a way that emphasizes that the publication and the various adaptions to theatre and film of the biography have been empowering to her and have improved her self-esteem: ‘I have met some remarkable people and made some wonderful friends. And no one ever asks me to do the washing up’ (McDonald 2010, 191). In McDonald’s writings, the universalizing dimension of disability aesthetics, the minority activism of disability art, and the empowering experience of art as therapy seem to come together in a weave that voices the main aspects of disability.

**Acting**

Ållateatern is a theatre group in the small town of Sundsvall, Sweden. Group members are people with mental disabilities. The work of Ålleteatern in the early 2000s is well documented by two social-work scholars at The University of Umeå. They have published PhD dissertations and articles in international journals (Inleand 2004, 2005; Ineland and Sauer 2007; Sauer 2004). The local social-care authorities in Sundsvall fund the group as an organised daytime activity that disabled people, not employed or enrolled in an educational program, are entitled to according to Swedish law. Organised daytime activities are expected to improve the well-being and social skills of people with disabilities. In the institutional logic of the local authorities, professionals are hired to achieve improvements in the well-being and social skills among actors in the theatre company. This is the therapy dimension of Ållateatern.
In the early 2000s, the theatre group was making headlines in culture sections of local and national newspapers. They staged a version of the opera Carmen by the French composer Bizét. The performance was acclaimed and even went on tour to Spain. One element in Carmen is the outsider position of gypsies. Reviewers pointed out that the visual presence of mental disability gave an interesting take on the issue of otherness in the opera. The reception of the play is not described in detail in the studies conducted, but the information provided brings up both outsider art and disability aesthetics as possible interpretative frameworks. The actors are clearly identifiable as disabled. They play the roles of gypsies and their disability is a vehicle that accentuates discrimination against minority groups. An authenticity is added to the outsider dimension of the play that is difficult to accomplish with non-disabled actors. This type of artistic strategy that brings in unexpected elements is highly appreciated in art practice. Important to the production of disability aesthetics is the recruitment of instructors. The instructors are to provide a daytime activity and are expected to apply therapeutic measures, but simultaneously the instructors contribute to creating Ållateatern as a theatre company with aesthetic goals (Ineland and Sauer 2007). To be hired as instructors, candidates must be experienced theatre workers. Therapy and aesthetics become intersecting discourses in Ållateatern.

Actors praise the recruitment of culture workers for other reasons than disability aesthetics. For the actors, instructors facilitate the creation of empowered social positions. The mentally disabled people who enrolled for the project had previously experienced a completely different logic of care in their careers as recipients of activation. People who ‘boss us around’ ran the daytime activities the actors were used to. Personnel even frequently withdrew to the coffee room in order to have a break from their work with the disabled. To the actors, the human service relationship at Ållatatern was a completely different experience. The actors were treated as contributors to a common artistic project. They were even given their own keys to the premises where they practiced. Sauer interviewed instructors as well. They were keen to tell him that they did not know what was common practice in daytime activation. When forming their role as instructors they draw solely on their experience as culture workers and course instructors (Sauer 2004, 157). The experience voiced by the actors of being liberated from the client role turns Ållateatern into disability art for the participants. Actors had been made passive by care workers, but saw Ållateatern as recognizing them as citizens with a disability and as active contributors to society.

Towards social practice art
This paper set out to outline the ways disability and art intersect. The result is a fourfold set of discourses composed of art therapy, outsider art, disability art, and disability aesthetics. These four ways of relating art and disability have first been outlined in their ideal typical forms. Second, it has been demonstrated how the four discourses are made relevant when actual art practice is analysed. By outlining the four discourses and following up by discussing empirical cases in-depth, it is suggested that bringing in a variety of discourses can serve as a vehicle to provide important nuances in understanding art practice involving disability.
In this concluding part, I would like to argue that social practice art holds a potential for systematising the diverse discourses of art and disability. The French curator Nicolas Bourriaud (2002) coined the related term ‘relational aesthetics’. What he did was to systematise a wide array of art practices highlighting social relations. Beginning in the 1990s, artworks were created where spectators were encouraged to relate to each other in new ways. Examples are the artist cooking in the gallery space and art collectives contributing to social and material improvements in poor neighbourhoods (Bishop 2012). What took place was a social turn in art from object production to performance. Art practice and social practice, the aesthetic and the political, were joined. One perspective on social practice art is that it is a cluster of art practices helping us imagine sustainable social institutions. In contrast to political art that is often found to celebrate disturbing the social order, social practice art is attuned to creating lasting relations and to imaging the inter-dependencies we all are part of in new ways (Jackson 2011, 18).

A clarifying example of social practice art took place in the village of Ulassai. The village mayor was concerned about an escalating social disintegration. He asked the artist Maria Lai, who grew up in the village, to create a statue that could serve as an object of identification and hopefully contribute to improved social relations. Lai rejected the idea, but suggested an alternative performative project building on a local myth of a blue ribbon. The project developed by Lai was to tie blue ribbons between the houses in the village with a number of knots and loops in them indicating the quality of relations between neighbours. The project was a success in that it improved relations among inhabitants and created new optimism for the future (Sardu et al. 2012). The hope of the mayor that a traditional artwork could contribute to changes was replaced by a social practice art project that had a positive effect both on psychosocial relations in the village and on dimensions of the political such as optimism for the future in the local economy.

Regarding the art therapy discourse, a social practice dimension is clearly present in the endeavours of improving the relations between disabled people and their local societies. Another important dimension is the involvement of social workers as facilitators and experienced artists as teachers in producing art. The art is produced in a collaborative effort that transgresses the relation between client and therapist, as was demonstrated in the case of Ållateatern. Social-work-framed initiatives of art practice can gain important momentum from reflecting therapeutic ambitions as valued art practice. To see practices traditionally subsumed under the label of art therapy as part of a wider trend of social practice in contemporary art opens up new spaces for inclusion and for empowering social relations.

In the case of outsider art there is an important merging of the aesthetic and the social, of art practice and social practice. Mental health institutions such as psychiatric hospitals and centres for creative growth are legitimised by the welfare system for their ability to improve the well-being of people with support needs. Simultaneously, creative practices emerge. Apart from their perceived therapeutic value, the creative practices are valued by aesthetic recognition. The authentic qualities of the artworks are praised, as are ideas about the creative intersection of
mental illness and creativity (Rhoades 2000; Carson 2011). Such merging of the social and the creative gives relevance to outsider art in the framework of social practice art.

In the discourse of disability art, the social practice dimension comes to the fore by artists addressing social issues concerning the discrimination experienced by disabled people. The art practice inscribes itself in social processes in two ways. First, disability, a pressing social issue, is addressed, and the artwork becomes a part of social discourses about disability. Second, the art practice plays an important role for the internal relations among disabled people. Their unity as a group is fuelled by their participation as contributors and as spectators taking part in art practices (Masefield 2008; Solvang 2012).

In the case of disability aesthetics, the social practice dimension is not self-evident. The relevance of social practice is dependent on the understanding of disability applied. Here, as in disability art, the social model of disability plays an important role. Addressing disability implies addressing social issues such as oppression, accessibility, and inclusion. In this way, disability aesthetics can be inscribed into the framework of social practice art where the link to the real world is celebrated, and the links to the museum or gallery space are downplayed (Thompson 2012, 22).

A possible limitation of social practice art is that it risks turning the socially engaged practices of relational art into solutions to social problems, integrated in the welfare apparatus. The autonomous and subversive character of art is threatened. Then, art as a vehicle for addressing political issues in a powerful way can be limited. In addition, art practices can be used to cover up shortcomings in welfare services (Bishop 2012, 188, 275).

Despite the challenges, inclusion in the concept of social practice art links the practices of disability and art to powerful trends in the mainstream art world. Many of the practices involving disability art can even be perceived as part of the social turn in art represented by social practice art. In understanding disability and art through the concept of social practice art, a process of inclusion takes place. This inclusion does not seem to make the established discourses of disability and art obsolete. The understanding of disability and art still needs the diversity of conceptualising disability and art to be recognized as part of a diverse set of discourses having different institutional logics and power relations. Among other things, identifying the more powerful subject in the interactional processes is important. In addition, there are important possibilities when art practice involving disability comes into the forefront in important mainstream perspectives on contemporary art. The inclusion of disability-related art practices in social practice art is a powerful recognition of disability’s societal importance. Together, the inclusion of discourses of art therapy, of outsider art, of disability art, and of disability aesthetics as part of social practice art is a potent resource, both for recognizing disability as a pressing social issue and for recognizing artists with disabilities and artists addressing disability issues.
References


