

Art as a Type of Therapy – Lives and Works of Artists in German, Swiss and Austrian Psychiatric Clinics in the 20th Century

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Abstract

After avant-garde artists had widened the use of traditional materials, styles and groups of creators to support the upgrading of psychotic artworks, psychiatric clinics became places of art production in the 20th century. As creative designing was institutionally embedded within these facilities from the 1950s onwards, questions about its functions within these contexts arose. This paper examines the lives and works of three non-professional artists living in German, Swiss and Austrian clinics by analysing six of their paintings and drawings. It asks about the reasons that led to the emergence of creative drives within them, about the needs they hereby satisfied and about the functions art had in their lives. In order to integrate their works within interdisciplinary research, the article draws on Erving Goffman's theory of total institutions to examine whether the case studies used art to express autonomy and self-determination within their socially, locally and economically restricted environment.

1. Introduction

1.1 Topical Introduction

In her book *Once a girl, now a woman*¹ Australian artist Nikki Rowe described the power of art as a healing mechanism after a car accident had left her with complex regional pain syndrome causing severe movement disorders.² With her statement that art is a "cure to all this madness, sadness and loss of belonging",³ she outlined the concept of art as a type of therapy which aims at the liberation of a person's feelings, traumata and concerns through the media of art

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¹ See Nikki ROWE, *Once a Girl, Now a Woman*, Bloomington 2013.

² See Nikki ROWE, Nikki Jade Collective. Blog, digitally available under: Nikki Jade Collective: <https://nikki-jadecollective.com/blogs/news/to-know-where-i-am-you-have-to-learn-a-little-bit-about-where-i-ve-been>, (10.02.2020).

³ ROWE, *Girl*, n. pag.

and creative designing. As a form of nonverbal communication, the use of materials like paper, clay or wood⁴ support an individual in expressing inner conflicts, in creating a sense of understanding about what has happened to them and in transforming their experiences to activate a healing process. Being part of a wide theoretical field, art therapies are nowadays used by numerous practitioners such as psychologists or counsellors who focus on the therapeutic value of a patient's output instead of their artistic originality.⁵

Although art therapy is now widely employed within these settings and discussed mainly from this perspective within medical and art-historical research, professional artists have used their creative urge to deal with discomfort, failure, exclusion and feelings of resentment for centuries. Since the beginning of the 19th century asylums and psychiatric clinics have been established as domains of the "mad artist", who was driven by a mental disorder to produce extraordinary works following the antique concept of the insane genius.⁶ Based on this, a second group of artists whose abilities were apparently triggered by a psychosis attracted attention in the 20th century: mentally ill individuals who became creatively active during their stay in a clinic for the first time. Based on a transformation process in the art scene around 1900 which led to an approval of new techniques, materials, topics and groups of artists,⁷ their products were recognised as fully valid artworks by theorists of the post-war era like Jean Dubuffet or Leo Navratil, whose concepts transformed the psychiatric clinic into a place of art production and merchandising.⁸ Accordingly, this article analyses the role of German, Swiss and Austrian psychiatric clinics as places to work and live for mentally ill artists in the 20th century and focuses on the significance of art as a therapeutic tool within their lives. The psychiatric clinic as an institution experienced a transformation around 1900 due to anti-psychiatry movements⁹ which affected each other in Austria, Germany and Switzerland and complemented

⁴ See Susan HOGAN, *Healing Arts. The History of Art Therapy*, London / Philadelphia 2001, 22.

⁵ See Cathy A. MALCHIODI, *The Art and Science of Art Therapy*. Introduction, in: Cathy A. Malchiodi, ed., *Handbook of Art Therapy*, 2nd edition, New York 2012, 1–3, here 1 f.

⁶ See Rainer STROBL, *Wahn - Welt - Bild*, in: Ingrid Brugger / Peter Gorsen / Klaus Albrecht Schröder, eds., *Kunst & Wahn*, Exhib. Cat. Kunstforum Wien 1997, Cologne 1997, 266–269, here 266.

⁷ See Dietrich SCHEUNEMANN, *On Photography and Painting. Prolegomena to a New Theory of the Avant-Garde*, in: Dietrich Scheunemann, ed., *European Avantgarde - New Perspectives. Avantgarde, Avantgardekritik, Avantgardeforschung*, Amsterdam / Atlanta 2000, 15–48, here 19–21, 23 f.

⁸ See Angelica BÄUMER, *Kunst von Innen. Von der Kraft des Unbewussten*, in: Angelica Bäumer, ed., *Kunst von Innen*, Vienna 2007, 8–14, here 11.

⁹ The term anti-psychiatry movement refers to a series of criticism against the education of psychiatrists and carers practising in a mental institution and the therapeutic measures that were implemented when dealing with the patients, especially the application of physical or emotional coercion. Providers of these movements, which first occurred around 1900 and culminated in the 1960s, were medics, psychiatrists or former patients who claimed that placing someone in a clinic does not aim at their recovery but is rather a form of control and social exclusion. See: Giovanni MAIO, *Das Bild der Psychiatrie in der Geschichte des fiktionalen Films*, in: *Fundamenta Psychiatrica* 16 (2002), 160–165, here 162 f.

the concurrent drive for renewal within the visual arts. Therefore, both this period and geographical area are deserving of more detailed investigation. By choosing a biographical and work-orientated perspective, the paper examines six works by Adolf Wölfli (1864–1930), Friedrich Schröder-Sonnenstern (1892–1982) and Oswald Tschirtner (1920–2007)¹⁰ who became creatively active in psychiatric clinics between 1899 and 2007. After an overview of approaches to art created by mentally affected individuals it investigates the intentions that led to the emergence of a creative drive within these artists and the needs they hereby pleased. In adopting Erwin Panofsky's iconographical-iconological method and Wolfgang Kemp's Aesthetic of Reception, the image analyses questions whether specific artworks reveal motifs and themes that mirror aspects of its creator's illness and life in the psychiatric clinic.

The paper not only tries to provide insights into the works of psychiatric patients from an art-historical perspective but also looks at the question how the psychiatric clinic as a habitat shaped the lives of artistically active mentally ill people. Therefore, it asks whether and to what extent the three patients viewed art as a way to treat their psychoses, if and how they used creative expressions in order to demonstrate self-determination and autonomy within their daily routine, which was restricted by therapies and medical treatment. Based on Erving Goffman's theory of Total Institutions¹¹, the paper works with the hypothesis that art is an option for patients of mental hospitals to free themselves from restraints, as they can choose topics, materials and timespans for becoming artistically active without being severely controlled by clinical staff. Without aiming at a complete overview of the topic of art therapy and art in psychiatric clinics, this article aims to make the range of artistry within these facilities visible in order to open up ideas about the connection between art production and self-definition in the 20th century.

1.2 State of Research – An Overview

The relations between art and madness and the significance of artistry in psychiatric clinics have been topics of scientific research within medical and psychiatric societies since the first half of the 19th century. As the number of ego-documents written by artists living in psychiatric clinics is small, the artworks themselves are the most important primary sources about their

¹⁰ This study excludes female case examples, as an investigation of women living and creating in Austrian, German or Swiss psychiatric clinics is hardly possible at that stage due to a lack of sources. Their identities are often not known and their works are difficult to access, which corresponds with the general research on female artists.

¹¹ See Erving Goffman, *Asyle. Über die soziale Situation psychiatrischer Patienten und anderer Insassen*, Frankfurt/Main 1973.

intentions. By contrast, the amount of published literature about artists living in psychiatric clinics, especially about schizophrenia, depression and their influence on artworks, is tremendously large.¹²

This also applies to the connection between art and therapy, which has been discussed mainly in studies on the history of medicine conducted in Great Britain since the 1940s. For example, a bibliography on this topic written in 1974 already listed more than 1175 publications.¹³ In German-speaking countries, the first large-scale research on art therapy and its significance for patients of mental hospitals was conducted in the 1970s, when Austrian psychiatrist Leo Navratil established this method of treatment within the *Heil- und Pflegeanstalt Gugging*. Based on Dubuffet's writings, he launched the *Haus der Künstler*, where he encouraged patients to become artistically active, and to sell and exhibit their works. To increase publicity about them on an international level, Navratil organised exhibitions in Switzerland, Austria and Germany¹⁴ and published books¹⁵ which introduced the reader to the facility's therapeutic concept by presenting some patients' biographies and artworks, also linking them with the *Art Brut* theory and similar concepts. Drawing on the research of Marcel Réja, who upgraded the products of mentally affected people as fully valid artworks,¹⁶ and Hans Prinzhorn, who stated that stylistic features cannot be used to define artworks as psychotic,¹⁷ Navratil was the first thinker who integrated these works into the contemporary art scene by actively promoting them.

Proceeding from Navratil's publications, the literature on *Art Brut* and art as a type of therapy shaped research on the topic of art in psychiatric clinics for the last 30 years. In their collection of essays called *Von Chaos und Ordnung der Seele. Ein interdisziplinärer Dialog über Psychiatrie und moderne Kunst*¹⁸, published in 1990, Peter Gorsen, Otto Benkert and their colleagues examined the connections between the works of mentally ill patients and avant-garde

¹² See Hartmut KRAFT, *Grenzgänger zwischen Kunst und Psychiatrie*, Cologne 1998, 29.

¹³ See Linda GANTT / Marilyn STRAUSS SCHMAL, *Art Therapy. A Bibliography - January 1940 - June 1973*, Rockville / Maryland 1974.

¹⁴ See Johann FEILACHER, *Kunst aus Gugging. Von 1970 bis zur Gegenwart*, in: Johann Feilacher / Nina Ansperger, eds., *gehirn gefühl!.. kunst aus gugging von 1970 bis zur gegenwart*, Salzburg 2018, 14–27, here 15–18.

¹⁵ See for instance: Leo NAVRATIL, ed., *Die Künstler aus Gugging*, Exhib. Cat. Museum Moderner Kunst Wien, Salzburger Landessammlung Rupertinum, Kunstamt Wedding Berlin, Heidelberger Kunstverein, Neue Galerie der Stadt Linz, Wolfgang-Gurlitt-Museum, Aargauer Kunsthau Aarau, 2nd edition, Vienna 1983.

¹⁶ See Marcel RÉJA, *Art chez les fous. Le dessin, la prouesse, la poesie*, Paris 2000 (Repr. of edition Paris 1907), taken from: KRAFT, *Grenzgänger*, 57.

¹⁷ See Hans PRINZHORN, *Bildnerei der Geisteskranken. Ein Beitrag zur Psychologie und Psychopathologie der Gestaltung*, Berlin 1922, 291 f., 294.

¹⁸ See Otto BENKERT / Peter GORSEN, eds., *Von Chaos und Ordnung der Seele. Ein interdisziplinärer Dialog über Psychiatrie und moderne Kunst*, Berlin / Heidelberg 1990.

artists. In his essay *Therapeutische Dimensionen der Kunst*¹⁹, Benkert studied the function of art as therapy and examined both the perception of psychotic art on modern artists and the influence of modern art on mentally ill patients. He thereby revealed new perspectives on the links between psychiatry and art, as he set up the hypothesis that the patients' constant engagement with modern art and conversations about these experiences could enable a psychiatrist to gain new insights into the disease and treatment process.

The importance of art therapy within the treatment of mentally ill individuals has also been discussed within research literature written about the *Art Brut* movement, such as Angelica Bäumer's collection of essays *Kunst von Innen*²⁰, whose main part addresses studios, workshops and museums in Austria that promote mentally affected people in becoming artistically active and deriving a profit from it. The research on the case studies has not yet concentrated on this aspect though. Only Schröder-Sonnenstern forms an exception in this respect, as his biographers Peter Gorsen and Alfred Bader²¹ have shown that he used art to treat his psychosis in the clinic and beyond. Taking their ideas as starting points, the following study seeks to fill this gap in the research.

1.3 Methodological Framework – Erwin Panofsky's Iconographical-Iconological Method and Wolfgang Kemp's Aesthetic of Reception

Besides written texts, images have been used as primary sources for historical research since the so-called visual turn, as they can portray collective perceptions or experiences and open up new perspectives on the roles of historical actors within past processes. As groups whose lives are otherwise not widely discussed in large-scale studies can hereby enter the limelight,²² image analyses are particularly promising for the investigation of mentally ill artists who work in places as stigmatised as psychiatric clinics. The art historian Erwin Panofsky's iconograph-

¹⁹ See Otto BENKERT, *Therapeutische Dimensionen der Kunst*, in: Otto Benkert / Peter Gorsen, eds., *Von Chaos und Ordnung der Seele. Ein interdisziplinärer Dialog über Psychiatrie und moderne Kunst*, Berlin / Heidelberg 1990, 149–164.

²⁰ See Angelica BÄUMER, ed., *Kunst von Innen*, Vienna 2007.

²¹ See Peter GORSEN, *Friedrich Schröder-Sonnenstern, 1892–1982. Gefangen zwischen Welterlösung und gesellschaftlicher Ausgrenzung*, in: Ingrid Brugger / Peter Gorsen / Klaus Albrecht Schröder, eds., *Kunst & Wahn*, Exhib. Cat. Kunstforum Wien 1997, Cologne 1997, 361–369; Alfred BADER, *Geisteskranker oder Künstler? Der Fall Friedrich Schröder-Sonnenstern*, Berne / Stuttgart / Vienna 1971.

²² See Irmgard WILHARM, *Einleitung. Geschichte, Bilder und die Bilder im Kopf*, in: Irmgard Wilharm, ed., *Geschichte in Bildern. Von der Miniatur bis zum Film als historische Quelle*, Pfaffenweiler 1995, 7–24, here 11, 13; Peter BURKE, *Eyewitnessing. The Use of Images as Historical Evidence*, London 2001, 12.

ical-iconological method offers initial access to such pieces, as it not only describes and classifies, but also interprets an artwork with recourse to its historical genesis and a broader historical framework.²³

In his essay *Iconography and Iconology. An Introduction to the study of Renaissance art*²⁴, Panofsky established three steps for analysing an artwork, starting with the pre-iconographical description. Here, the analyst should trace the figures and stylistics of an artwork in order to identify its motifs, their relation to each other and the emotions they prompt in an observer. Following this first stage, which is based on the history of styles and the observer's daily experiences with objects, the (art) historian shall move on to the iconographical analysis. Next, he must combine motifs and stylistics with overall ideas and themes without interpreting them by consulting traditional sources known to both the artists and the commissioners of the artwork such as the Bible, ancient mythological writings and historiographical texts. To detect the correct types and the images' intrinsic meanings, the historical background, intentions of artists and patrons, traditional and contemporary theological, philosophical, political and social concepts have to be examined in a third step, which Panofsky called the iconological interpretation. Based on a synthesis of the first two stages' results with these further documents by artists, patients or people they had contact with,²⁵ the artwork is viewed as a symbol of the "attitude of a nation, a period, a class, a religious or philosophical persuasion"²⁶ and transcends being a simple visual aid.

As Panofsky's model does not consider an image's self-purpose, historical research still often uses it solely as an additional tool to analyse a process in depth or from a different perspective. The artwork is instrumentalized as a dependent source which can verify statements that have already been made with the aid of written documents.²⁷ Hence, to find out how the works of psychiatric patients were perceived, this paper also relies on Wolfgang Kemp's interpretation of Reader-Response Criticism, known as the Aesthetic of Reception, which he developed in the 1980s based on literary theories about the role of the reader within texts.²⁸ Kemp's model focuses on the context of reception, an artwork's "conditions of access and [...]"

²³ See Martin LENGWILER, *Praxisbuch Geschichte. Einführung in die historischen Methoden*, Zurich 2011, 141.

²⁴ See Erwin PANOFSKY, *Meaning in the Visual Arts*, Chicago 2004.

²⁵ See PANOFSKY, *Meaning*, 38–43, 45 f., 49.

²⁶ *Ibid.*, 40.

²⁷ See Franz X. EDER / Oliver KÜHSCHMELM, *Bilder – Geschichtswissenschaft – Diskurse*, in: Franz X. Eder / Oliver Kühschelm / Christina Linsboth, eds., *Bilder in historischen Diskursen*, Wiesbaden 2014, 3–44, here 6 f.; BURKE, *Eyewitnessing*, 10.

²⁸ See Sonja PÖPPEL, *Das therapeutische Potenzial der Kunstrezeption. Studien zur Rezeptionsästhetischen und bildwissenschaftlichen Grundlegung einer Rezeptiven Kunsttherapie*, Berlin 2015, 25.

appearance”²⁹. By studying criteria like sites, time-frames, patrons, connections to religious and socio-political discourses or the artists’ intentions Kemp’s concept guarantees a complete interpretation that takes the observer and his relationship with the object into account. Based on his statement that every artwork calls for a beholder, who is integrated within the entire production process,³⁰ he set up a work-orientated method, which examines strategies of communication between artworks and their recipients.³¹ Kemp suggested to start with the extrinsic conditions of access, such as the artwork’s surroundings, original function and conditions of appearance (including size, format and direction) and then to contextualise the artwork within the history of reception by looking at the beholder’s rank or the piece’s use over time. Subsequently, the analysis of the intrinsic points of reception, which focuses on the significance of the image’s elements for the observer, takes place. This second step examines the beholder’s perception of gestures, the positioning and relations of the objects with each other, and their interaction with the viewer. At this stage, figures of identification within the picture and their way of communicating with the addressee are questioned by looking at image sections, perspectives, gaps and how the observer supplements them.³² By using these categories, new insights into the interaction of mentally ill artists with their environment and the use of art as therapy can be gained for a deeper analysis of the perception of psychotic art.

2. *Art Brut*, Outsider Art and the Institutionalisation of the Artworks of Mentally Affected People

After the works of psychotic individuals had for centuries been rejected as unimaginative products born out of boredom, modern artists recognised their artistic value at the beginning of the 20th century. Debates about art in psychiatric clinics and the influence of mental illnesses on creative processes were initiated by avant-garde thinkers. By honouring mentally ill people as fully valid artists, they rooted this type of creative activity within the modern art scene. In the 1930s and 1940s, however, these attempts were repressed by National Socialist theories about health, race hygiene and the ideal German. As mentally affected people were classified

²⁹ Anne D’ALLEVA, *Methods and Theories of Art History*, London 2005, 115.

³⁰ See Sergiusz MICHALSKI, *Einführung in die Kunstgeschichte*, Darmstadt 2015, 78; Wolfgang KEMP, *Kunstwerk und Betrachter. Der rezeptionsästhetische Ansatz*, in: Hans Belting et.al., eds., *Kunstgeschichte. Eine Einführung*, 7th edition, Berlin 2008, 247–265, here 248, 250.

³¹ See Peter LODERMEYER, *Transformationen des Stillebens in der nachkubistischen Malerei Pablo Picassos*, Münster 1999, 20; KEMP, *Kunstwerk*, 250.

³² See Wolfgang KEMP, *The Work of Art and Its Beholder. The Methodology of the Aesthetics of Reception*, in: Mark Cheetham, ed., *The Subjects of Art History. Historical Objects in Contemporary Perspectives*, Cambridge 1998, 180–196, here 183–187.

as “dangers” to maintaining a healthy nation and as “unworthy to live”, according to the *Law for the Prevention of Hereditarily Diseased Offspring* (*Gesetz zur Verhütung erbkranken Nachwuchses*), more than 70 000 psychiatric patients were gassed to death on German and Austrian territory within the *Aktion T4*. Their artworks had already been presented as epitomes of degeneration in the notorious *Exhibition on degenerate art* in 1937/38, whose organisers declared them as worthless, immoral creations of a mad race, which would lead to the downfall of the German Reich and the destruction of the Aryan genetic constitution.³³

In response to the National Socialist campaign to destroy artworks created by mentally ill people, the French painter and art theorist Jean Dubuffet developed a deliberately polarising concept in 1945.³⁴ During his studies in the 1920s, his surrealist and Dadaist colleagues inspired him to engage with artists living in psychiatric clinics, who they admired for their original, authentic and irrational artistry, which seemed to be free of social, political or academic restrictions.³⁵ Based on these encounters and travels to Swiss clinics and their art studios,³⁶ Dubuffet coined the expression *Art Brut*, which can be translated as raw, unhewn, original and unworked art. He herein included all products created by people who are not part of leading cultural movements³⁷ and who practise without referring to artistic rules, role models, and public or institutional demands. According to Dubuffet, such individuals become artistically active due to an inner urge, based on their own creativity and without training or instructions.³⁸ As they do not organise or analyse the creative process, they let innate unconscious and spontaneous elements determine motifs and materials. Even though these artists are therefore quite autonomous in relation to artistic trends, the *Art Brut* movement does not represent a sub- or counterculture against academic artistic directions but rather a parallel development.³⁹

³³ See Angela FINK, *Kunst in der Psychiatrie. Verklärt, verfolgt, vermarktet*, Vienna 2012, 41 f., 48–53, 65 f., 71, 76 f.; John MACGREGOR, *The Discovery of the Art of the Insane*, Princeton 1989, 92, 102 f., 173 f., 177 f.

³⁴ See FINK, *Kunst*, 82.

³⁵ See Allan BEVERIDGE, *A Disquieting Feeling of Strangeness. The Art of the Mentally Ill*, in: JRSM. *Journal of the Royal Society of Medicine* 94/11 (2001), 595–599.

³⁶ See Claudia DICHTER, *Art Brut – gestern und heute. Ein Überblick*, Ingried Brugger / Peter Gorsen / Klaus Albrecht Schröder, eds., *Kunst & Wahn, Exhib. Cat. Kunstforum Wien 1997, Cologne 1997*, 58–67, here 64.

³⁷ See Leo NAVRATIL, *Einleitung. Art Brut und Psychiatrie*, in: Leo Navratil, ed., *Die Künstler aus Gugging, Exhib. Cat. Museum Moderner Kunst Wien, Salzburger Landessammlung Rupertinum, Kunstamt Wedding Berlin, Heidelberger Kunstverein, Neue Galerie der Stadt Linz, Wolfgang-Gurlitt-Museum, Aargauer Kunsthau Aarau*, 2nd edition, Vienna 1983, 25–48, here 28.

³⁸ See FINK, *Kunst*, 82 f.

³⁹ See BÄUMER, *Kunst*, 14; Peter GORSEN, *Das Prinzip der Art Brut*, in: Ingried Brugger / Peter Gorsen / Klaus Albrecht Schröder, eds., *Kunst & Wahn, Exhib. Cat. Kunstforum Wien 1997, Cologne 1997*, 26–33, here 30; NAVRATIL, *Einleitung*, 29.

Although psychiatric patients and mentally affected artists represent the biggest group within the *Art Brut* community, the decisive factor for a person's belonging to the movement is not mental illness, but the socially isolated environment he or she lives in. Therefore, other kinds of non-professional artists and minorities such as elderly people, prisoners, spiritists, people living at or below the poverty line, and autodidacts can be *Art Brut* members as well.⁴⁰ What connects the different factions are their self-definition and the perception of the works they create with or without limited contact to the outside world.⁴¹ According to Dubuffet's theory, none of them considers him- or herself as an artist, since they do not intend to exhibit, sell or market their works, but just create for themselves⁴² and often do not even classify their activities as creative occupations. Rather, they rather interpret them as playful means of distraction or caricatures which emanate from a personal, inner need and are normally not promoted from the outside, for example by psychiatrists, caretakers or managers.⁴³

Given that the decisive factor for the artists' identification as *Art Brut* members was not mental illness but the environment they lived in, Dubuffet rejected the term "insaneart".⁴⁴ Viewing urgent drives to become artistically active, which had always been attributed to insanity, as extensions of "normal" impulses immanent in both mentally healthy and mentally ill people,⁴⁵ he emphasised that "the artistic function is identical in all cases, and there is no more an art of the insane than there is an art of dyseptics or those with knee problems"⁴⁶. Dubuffet placed the examination of psychotic art on a new level by highlighting the influence of the patients' status within society and their role as outsiders instead of focusing on the psychosis.⁴⁷ Nonetheless, with regard to his statements that *Art Brut* artists would not be interested in publicity, would not consider other artistic movements when they choose themes or stylistics, or would only create in a raw and unrefined way,⁴⁸ Dubuffet's concept remained something of an idealised sketch.

⁴⁰ See FINK, *Kunst*, 82 f.; Ian CHILVERS / John GLAVES-SMITH, *Oxford Dictionary of Modern and Contemporary Art*, 2nd edition, Oxford 2009, 35.

⁴¹ See BÄUMER, *Kunst*, 11; Johann FEILACHER, Vorwort, in: Johann Feilacher / Nina Ansperger, eds., *gehirn gefühl.!. kunst aus gugging von 1970 bis zur gegenwart*, Salzburg 2018, 6–13, here 8.

⁴² See NAVRATIL, *Einleitung*, 29.

⁴³ See Michel THÉVOZ, *Art Brut. Kunst jenseits der Kunst*, Aarau 1990, 11; NAVRATIL, *Einleitung*, 28.

⁴⁴ See FINK, *Kunst*, 82 f.

⁴⁵ See NAVRATIL, *Einleitung*, 28.

⁴⁶ Kaira M. CABANAS, *Learning from Madness. Brazilian Modernism and Global Contemporary Art*, Chicago / London 2018, 47.

⁴⁷ See BÄUMER, *Kunst*, 11.

⁴⁸ See Viola LUZ, *Wenn Kunst behindert wird. Zur Rezeption von Werken geistig behinderter Künstlerinnen und Künstler in der Bundesrepublik Deutschland*, Bielefeld 2012, 356; MACGREGOR, *Discovery*, 300.

Based on Dubuffet's theory, Leo Navratil developed a second approach with a different focus. During experiments on the use of art and language as a means to diagnose and treat illnesses, he realised that some of his patients' texts and paintings should be considered as works of great aesthetic value. Therefore, he provided their creators with a house separated from the rest of the clinic where they could explicitly act out their artistic wishes. Within the building, which is known as the *Haus der Künstler*, they could dedicate themselves to their creative drives and receive visitors like the writer Ernst Jandl⁴⁹ or visual artist Arnulf Rainer. Especially the encounter with Rainer, who provided Navratil with art-historical knowledge, inspired the psychiatrist then to examine the use of art as therapy in psychiatric environments.⁵⁰

For Navratil, art functions as a therapeutic tool because it enables patients to consider their works as accomplishments, thereby increasing their self-confidence, sense of self-worth and self-esteem. By triggering self-healing mechanisms, it would not only calm the patient down but also facilitate communication and interaction. Therefore, the psychiatrist encouraged his patients to live out their artistic drives, to sell and market their works and installed a room for purchasing works in the new residence. Although he rejected the idea of earning profits from selling his patients' artworks, he saw the marketing of their products as an essential matter for the creators' self-esteem, their perception as artists and their recognition as being of equal worth to professional artists. In order to present these works not only within official institutions but within their original environment as well,⁵¹ Navratil installed a gallery in the *Haus der Künstler* in 2005, as well as a museum, which since 2006 has been dedicated to research on the house residents and the preservation of their artistic works.⁵²

Unlike other psychiatrists, Navratil deliberately requested the residents to be creative by suggesting topics and materials or by giving them concrete sketches or prototypes they could imitate or use as stimuli. Although he tried to avoid influencing them aesthetically, he was criticised for this procedure with respect to the requirements of the *Art Brut* concept, which requires that patients be creative without following directions. Therefore, Navratil put his ideas into writing by developing the term "zustandsgebundene Kunst" ("situation-specific art").⁵³ Like Dubuffet, he stated that there is no difference between the art a psychiatric patient

⁴⁹ See Melissa S. ETZLER, *Peripheral Writing. Psychosis and Prose from Ernst Herbeck to W. G. Sebald*, in: Önder Çakırtaş, ed., *Literature and Psychology. Writing, Trauma and the Self*, Cambridge 2019, 18–48, here 19 f.

⁵⁰ See FINK, *Kunst*, 87.

⁵¹ See NAVRATIL, *Einleitung*, 33, 46, 48.

⁵² See FEILACHER, *Vorwort*, 10.

⁵³ NAVRATIL, *Einleitung*, 29.

or a mentally healthy artist produces. However, instead of viewing social circumstances as trigger factors for the patients' engagement with art, he thought that the human consciousness and soul can enter a state of mind which liberates the individual from the restrictions of a daily routine and awakes hidden artistic drives. Without reducing an artwork to its creator's mental disorder, Navratil interpreted the psychosis as the main force to provoke artistic engagement and saw the "Zustand" (situation) as a relevant coefficient.⁵⁴

Navratil's successor, Johann Feilacher, took a further step forward by not considering the state of the psychosis alone as an eminent factor for the interpretation of works by psychiatric patients as artworks. He stated that a mentally ill person's ability to create need not decline if their health improves, but that they can create aesthetic works in periods of regeneration or full recovery as well. By coining the term "ars amabile",⁵⁵ Feilacher widened Dubuffet's and Navratil's concepts, as this type of creativity can be applied to mentally affected people who become artistically active but do not produce unique works that meet *Art Brut* criteria. Instead, he included products whose evaluation is undertaken by psychiatrists who interpret in relation to the creators' illness rather than their artistic value.⁵⁶

3. Lives and Works of Artists in German, Swiss and Austrian Psychiatric Clinics – Art as a Form of Therapy and Medium of Expression

Although the psychiatric clinic did not develop into a place of professional art production until the 1950s, the beginnings of non-institutional artistry within mental health facilities date back to the 1800s. Although there was never any intent to promote the patients' artistic abilities,⁵⁷ within the context of occupational therapies, inmates were allowed to paint, draw, carve and engage in any type of handicraft which might on the one hand exert discipline over them and calm them down and on the other hand organise their free time.⁵⁸ Amongst the various reasons that motivated psychiatric patients to become artistically active, such as boredom, the desire to regain control of their lives and prove their mental sanity, or the wish to document the treatment and progression of their illness, the use of art as therapy cannot be underestimated.

⁵⁴ See Cornelia OFFERGELD, Was aber ist Gugging?, in: Ingrid Brugger / Peter Gorsen / Klaus Albrecht Schröder, eds., *Kunst & Wahn*, Exhib. Cat. Kunstforum Wien 1997, Cologne 1997, 393–405, here 394; NAVRATIL, Einleitung, 29 f., 42, 47 f.

⁵⁵ Johann FEILACHER, *Art Brut & Co*, in: Angelica Bäumer, ed., *Kunst von Innen*, Vienna 2007, 134–137, here 136.

⁵⁶ See FEILACHER, *Art Brut*, 136.

⁵⁷ See Thomas RÖSKE, Eruptionen des Unbewussten?. Künstlerisches Schaffen in der Psychiatrie um 1900, in: Karin Dannecker / Uwe Herrmann, eds., *Warum Kunst?. Über das Bedürfnis Kunst zu schaffen*, Berlin 2017, 23–31, here 24.

⁵⁸ See LUZ, *Kunst*, 62.

Some patients used creative activity to deal with their compulsory clinical confinement, the loss of family connections, legal status, rights, and freedom to organise their own lives. Others did not simply reflect their new routine and environment, but also perceived themselves as artists. By exchanging their works for food, clothing or money, they began to realise their hopes for a life with less restrictions, as they practised a respected profession and contributed to the society that seemed to have abandoned them.⁵⁹

The three following case studies - Adolf Wölfli, Friedrich Schröder-Sonnenstern and Oswald Tschirtner - underline the varieties in the use of art therapy within German, Swiss and Austrian psychiatric clinics. They illustrate that it is vital to take account of different types of illnesses, lengths of stay, and individual freedoms, as well as types of treatments and asylums, in order to answer the question as to whether an inmate used art as a therapeutic tool. Including all these variable in the analysis produces multi-layered results. For example, Adolf Wölfli's case helps to show how artists could respond to creative opportunities during lifelong imprisonment, isolation, and physical and mental threat. Friedrich Schröder-Sonnenstern's oeuvre makes the beholder question terms such as mad art/art in psychiatric clinics and makes clear that drawing on mental illnesses and connected stereotypes can be deliberately used as a marketing strategy by the artist to promote his work. Schröder-Sonnenstern thus makes the observer aware that using the terms psychotic art and art as therapy must always occur within institutional and biographical contexts. By contrast, Oswald Tschirtner's life and work indicates that, although art therapy might be well established within an institution, not every resident happily responds to it. Indeed, his case illustrates how being forced to engage in creative activity from the outside can provoke an opposite effect to the one intended and opens up new perspectives on the use of art therapy in communities.

3.1 Life, Work and Illness of Adolf Wölfli

3.1.1 Adolf Wölfli's Biography, Anamnesis and Artistry

Adolf Wölfli was born in 1864 in the Canton of Berne as the son of a dipsomaniac stone carver and a laundress, who supplemented the family's income through occasional prostitution during her husband's regular imprisonments. After his father had left the family when Wölfli was

⁵⁹ See Ingrid VON BEYME / Sabine HOHNHOLZ, *Vergissmeinnicht - Psychatriepatienten und Anstaltsleben um 1900. Aus Werken der Sammlung Prinzhorn*, Berlin 2018, 2 f., 135, 247; FINK, *Kunst*, 13 f., 16 f.

six years old and his mother had died in 1873, Adolf was entrusted to the cantonal administration's care, who organised accommodation for him in Bernese farmsteads, where he had to work for food and shelter as a so-called 'Verdingkind' (indentured child). The following years were shaped by hard physical work on the foster families farms and abuse by employers, which was a striking factor within the development and progression of his mental illness. Based on these childhood traumata, Wölfli's psychosis was triggered by a rejected marriage proposal,⁶⁰ which caused him to direct his interests to underage girls. After he had been repeatedly caught during forceful sexual interaction with infants and had been imprisoned several times, he was brought to the Waldau asylum to get his mental sanity and accountability tested. As he was diagnosed with schizophrenia, combined with a severe form of paranoia, hallucinations and violent behaviour, he was kept in the asylum for 35 years until his death in 1930.⁶¹ His detention in a solitary confinement cell for more than 20 years, which restricted contact with other patients because of his outbursts, inspired him to draw, write prose and poems, compose music and to write an autobiography from 1899 onwards.⁶² Wölfli's motivation to become creatively active was initially caused by boredom and few possibilities to communicate, representing a kind of game and time-killer, according to his biographer and psychiatrist Walter Morgenthaler.⁶³ At the same time, this development was also shaped by an inner need to express feelings and thoughts about his life and environment.⁶⁴

Wölfli's drawn oeuvre can be divided into two parts containing single sheets and connected series made for his personal use⁶⁵ and the so-called 'Brotkunst' ('bread and butter art'), which consisted of works he produced explicitly for sale.⁶⁶ Although most of them rely on ornamentation and a combination of repetitive symmetrical, circular or oval patterns, they are regularly interrupted by small figurative scenes. These are combined with explanatory descriptions, appellations or poems that provide the persons with a story, as image and writing interact.⁶⁷ To add contrast, Wölfli alternated astrological and geometric signs with animals,

⁶⁰ See Manuela DOBLER, *Die Bedeutung der Kunst Adolf Wölfli's aus kunsthistorischer und psychologischer Perspektive*, Dipl. Proj., Innsbruck 2004, 33.

⁶¹ See KRAFT, *Grenzgänger*, 203; THÉVOZ, *Art Brut*, 132.

⁶² See THÉVOZ, *Art Brut*, 132.

⁶³ See Walter MORGENTHALER, *Ein Geisteskranker als Künstler*, Berne / Leipsic 1921, 74.

⁶⁴ See THÉVOZ, *Art Brut*, 132.

⁶⁵ See *ibid.*, 132; Daniel BAUMANN, *Adolf Wölfli. Selbstermächtigung und Weltentwurf*, in: Angelica Bäumer, ed., *Kunst von Innen*, Vienna 2007, 42–50, here 42.

⁶⁶ See Elka SPOERRI, *Adolf Wölfli, 1864–1970*, in: Ingrid Brugger / Peter Gorsen / Klaus Albrecht Schröder, eds., *Kunst & Wahn*, Exhib. Cat. Kunstforum Wien 1997, Cologne 1997, 159–168, here 165.

⁶⁷ See BAUMANN, *Adolf Wölfli*, 44; Elka SPOERRI, *Adolf Wölfli (1864–1930). Werke aus einer Privatsammlung*, Exhib. Cat. Campagne Rosenberg 1984, Berne 1984, 7.; Marianne WACKERNAGEL, *Adolf Wölfli. Die Schenkung Ernst und Maria Elisabeth Mumenthaler-Fischer*, Exhib. Cat. Kunstmuseum Basel 1998, Basel 1998, 11–14.

interiors, landscapes or characters which represent himself, family members or public figures.⁶⁸ Additionally, he designed so-called geographic booklets where he laid down his visions of a better world by describing fictional travels or social and political topics such as technology and urban and rural life.⁶⁹ The following examples provide insights into Wölfli's use of art as therapy by reflecting on a topic that permanently concerned him: the idea of sexuality.

3.1.2 Art as a Type of Therapy in Adolf Wölfli's Life – His Idea of Sexuality

As Morgenthaler has already pointed out, sexuality plays a huge role within Wölfli's works. One of the early black and white drawings, *Die Assisen des Mittellandes* (Figure 1), dates from 1904. It consists of two sheets, which are decorated over and over again with ornaments, and is today exhibited in the art museum of Berne. In this drawing, measuring 99,5 x 74,5 cm, Wölfli dealt with the sexual crimes⁷⁰ that led to his imprisonment in the asylum. In the right upper-hand corner, a woman is lifting her dress to reveal her genitals and turns to the figure of the devil, who is diametrically positioned at the sheet's lower corner and grins at the observer. He is wearing a coxcomb with bells and a furry coating, which only reveals his highly erect penis. In contrast to the devil, who is a distinct figure within the drawing, the female returns regularly in different forms. She faces the beholder in the right-hand sheet's lower left part, where she is kept behind bars and has to watch a wild animal overpowering a weaker one. On her left, the same female archetype is embraced by a ribbon sitting next to a man in a black robe, who sets his eyes on seven colleagues. They have taken a seat on a bench spreading across the left-hand sheet and represent judges in the region *Mittelland*. The German term *Assisen*, which is added underneath, refers to a type of Swiss court,⁷¹ which is in charge of convicting and punishing highly dangerous criminals.⁷² That the hour of judgement has come is not only evident when looking at the Latin word "Mori", meaning death or condemnation, but also when observing a man who is pulling at the strings of a tower clock (Wölfli inserted himself in front of the prosecutor to make the observer aware of his deeds).

⁶⁸ See Elka SPOERRI, Adolf Wölfli, Artist / Builder. A Consideration of His Life and Works, in: Tanya Heinrich, ed., *The Art of Adolf Wölfli: St. Adolf-Giant-Creation*, Princeton 2003, 15–27, here 17 f.

⁶⁹ See SPOERRI, Adolf Wölfli, 159–165.

⁷⁰ See *ibid.*, 78, 446.

⁷¹ See SPOERRI, Adolf Wölfli, 41.

⁷² See Karl SCHÄFER, *Die Strafprozessordnung und das Gerichtsverfassungsgesetz*, Vol. 3, 22nd edition, Berlin / New York 1974, 2803 f.

Wölfli's drawing consists of various ornamentations, which he included for various reasons: to provide, structure, to calm himself down, to act out impulses,⁷³ and to rise beyond limits of space and time or academic expectations regarding naturalism. As the ornamentations could graphically drown out hallucinatory voices, according to Manuela Dobler, Wölfli's interest in synchronising the picture by using neologisms, unprecedented symbols and purposeless proportions was also a therapeutic tool to cope with attacks of paranoia.⁷⁴

In addition, the artwork is full of symbols of death, guilt, sex and crime. By inserting the same female archetype three times, Wölfli provided figures of identification for the beholder, as the women directly face him. The first person of reference is the female in the drawing's right upper part, who represents one of Wölfli's victims⁷⁵ and confronts the beholder with her bare sexuality by lifting up her dress. It can be interpreted as Wölfli trying to gain sympathy and understanding for his actions by making the (male) observer aware of her genitals and by provoking sexual desire in him, so the beholder could now relate his feelings to the drives that caused the artist's actions. With this figure, Wölfli viewed the female as a medium of seduction, as she deliberately lifts her dress and attracts (male) attention without being forced to do so. He then places her in contrast to the woman locked behind bars, who is at the mercy of the two fighting animals that could attack her at any moment. As she has to watch one animal succumbing to the other, the act resembles Wölfli's crimes, who - despite being a strong adult - tried to molest little, defenceless girls. Hence, on the one hand the woman embodies Wölfli's idea of the silent, vulnerable female, but on the other hand she represents an eyewitness who caught the Swiss red-handed in his attempts at assault.

Wölfli also integrated people who represent his opponents' perspectives, such as expert witnesses or the public (for example, the woman sitting next to the judge in the gloriole). According to Morgenthaler, she can be identified as the witness who recognised Wölfli as a perpetrator;⁷⁶ this figure's sides with the prosecutor next to her and the observer, who she tries to make aware of the consequences of Wölfli's crimes. She is the mediating figure on the drawing's left and right sheets, since her testimony supports the assizes in convicting the artist. As they pass judgement on Wölfli's actions, he portrays himself as the devil,⁷⁷ who has always been associated with evil. According to his interrogation protocols, Wölfli was aware of the moral and legal condemnations his actions deserved and of the emotional and physical harm

⁷³ See MORGENTHALER, *Geisteskranker*, 77–80.

⁷⁴ See DOBLER, *Bedeutung*, 93–96.

⁷⁵ See KRAFT, *Grenzgänger*, 205.

⁷⁶ See MORGENTHALER, *Geisteskranker*, 44.

⁷⁷ See KRAFT, *Grenzgänger*, 205 f.

they caused. As he declared that his tendency to masturbate was a key factor for their occurrence,⁷⁸ he provided the devil with an erect penis and a coxcomb and thereby connected himself to the fool, who is the embodiment of the social misfit within Western culture but has always enjoyed immunity from persecution. Therefore, Wölfli did not depict the punishment itself, unlike in other artworks where he portrayed himself while he being cut into pieces or crucified.⁷⁹ He dealt with his mental illness, crimes and isolation by confronting himself with his self-perception instead.

Besides sexualised figures, Wölfli used objects and patterns to depict his sexual tensions. Next to unambiguous phallic symbols like the devil's erect penis, he inserted ovoid shapes into his drawing's corners and blank spaces, which reflect death and regeneration, birth, transformation, fertility and potency. Also, ornamentations like slugs and their extension, the 'Vögeli',⁸⁰ must be interpreted within this context. Often positioned near female sexual organs or in a child's hands, the 'Vögeli' function as emblems of Wölfli's sexual crimes. Since the linguistic root of the term 'Vögeli' resembles vulgar expressions for sexual intercourse,⁸¹ Morgenthaler saw the accumulation of these elements in Wölfli's oeuvre as a sign of pansexualisation,⁸² a spreading of sexual needs onto every part of his life.

This is further evident when looking at his depictions of the exterior of the *Waldau asylum*, for example, in a coloured drawing he made in 1921, whose measurements and provenance are not known and in which he addressed the clinic's reconstruction (Figure 2). Wölfli embedded within an ornamental frame the asylum's three-axe main building, which is structured by gabled roofs, balconies, arched and casement windows. Every part of the drawing is suffused by slug and Vögeli ornaments, which surround the architecture, shape the frame or are arranged in pairs kissing and holding each other's hands. Untouched by the 'Vögeli', though, are four whiskery male faces who look to the side, at each other or encircle the building.

⁷⁸ For further information see: MORGENTHALER, *Geisteskranker*, 57–62.

⁷⁹ See Christoph WETZEL, *Das große Lexikon der Symbole*, 2nd edition, Darmstadt 2011, 206.; KRAFT, *Grenzgänger*, 208.

⁸⁰ See WETZEL, *Lexikon*, 72; Elka SPOERRI, *Formeninventar und Bildtypen im bildnerischen Werk Adolf Wölfli*, in: Elka Spoerri / Alfred Bader, eds., *Adolf Wölfli*, Exhib. Cat. Kunstmuseum Bern 1976, 2nd edition, Berne 1976, 9–33, here 15.

⁸¹ See DOBLER, *Bedeutung*, 44.

⁸² See MORGENTHALER, *Geisteskranker*, 48.

Although Wölfli was interned in the asylum for 35 years and constantly commented on unfair treatment,⁸³ his drawing does not show signs of aversion towards the clinic's routines or the building itself, as he designed an open, well lit institution consisting of the ornaments and symbols that characterise his style. Nevertheless, because as he integrated sexualised elements into the picture, his depiction of the *Waldau asylum* can be interpreted as an analysis of his confinement there and as a reconsideration of the reasons that led to his incarceration, including the sex crimes he committed. Since he associated the stay with solitary confinement in a padded cell, the male faces can be interpreted as menaces haunting him during hallucinations, suggesting that he was also reflecting on his mental illness by depicting the asylum. Therefore, by adding personal elements and ornaments to the building, Wölfli demonstrated that he could shape the institution as a habitat and that he was able to adjust the building to his needs.

Proceeding from these image analyses, it is possible to affirm the importance of stylistic features as a means of art therapy in Wölfli's life. Manuela Dobler has argued that mental illness promoted his isolation and dissociation from the outside world, as well as a split in his identity. This caused him so much anxiety, anger and helplessness that he tried to find peace and order by depicting themes about origin and regeneration, such as female sexuality, which was more or less present in both images. Art vitalised Wölfli's self-regulating forces, supported him in overcoming his traumata, and functioned as a tool for making sense of his situation, by giving him not only a pastime but also the possibility of marketing his works. He sold several of them from the 1910s onwards and was able to establish himself as an artist.⁸⁴ He thus reached the point where art developed into a medium of fruition, enabling contact with a mentally healthy audience and making its creator aware of his own value.⁸⁵ By expressing his urges both verbally and pictorially, Wölfli also influenced the evolution of the Waldau asylum not just as a new site for the systematic production and marketing of art, but also as a place to live.

⁸³ See GORSEN, Friedrich Schröder-Sonnenstern, 361.

⁸⁴ See DOBLER, Bedeutung, 95 f.

⁸⁵ See BENKERT, Dimensionen, 157.

3.2 Life, Work and Illness of Friedrich Schröder-Sonnenstern

3.2.1 Friedrich Schröder-Sonnenstern's Biography, Anamnesis and Artistry

Friedrich Schröder-Sonnenstern was born in 1892 near Tilsit. He was the son of a dipsomaniac newspaper deliverer and a peasant woman⁸⁶ and was repeatedly committed to clinics from the age of fourteen onwards due to theft, sexual harassment, vagabondage, violence or delusional behaviour. Having already been diagnosed with hebephrenia in 1915,⁸⁷ Schröder-Sonnenstern fell foul of the law again when he engaged in fraud as the leader of a supposed healing cult in Berlin. He was admitted to the *Landesheilanstalt Neustadt* in 1933, after prison officials had come to doubt his sanity. In the asylum, where he was declared an antisocial psychopath suffering from pathological lying,⁸⁸ he is said to have observed a mentally ill artist who inspired him to draw. However, the eighteen pencil drawings that survived beyond Schröder-Sonnenstern's stay originated during occupational therapy. They consist of geometrical ornamentations, numbers and metaphysical symbols that are arranged around brief explanatory extracts.⁸⁹ After having given up drawing for sixteen years following his release from the clinic, Schröder-Sonnenstern decided in 1949 to reconnect with his creative period in Neustadt and to work as a professional artist. Although he was able initially to establish himself on the German exhibition scene, galleries and museums lost interest in him in the 1970s after art-dealers discovered that he engaged in forgery. Having spent his last years in isolation and poverty, after his death in 1982 Schröder-Sonnenstern was ultimately rehabilitated as one of the most striking artists of the second half of the 20th century.⁹⁰

Schröder-Sonnenstern's paintings, which constitute the major part of his oeuvre, can be characterised by a preference for inexplicable symbols, vibrant colours, and deformation. As he thought in terms of antagonisms, his paintings are filled with organic, round, spiral or curvy forms, which are intended to reflect the circle of life and philosophical ideas about origin and primal principles. By using strategies of sequencing, duplication and grotesque linking, he constructed fantasy creatures facing each other, which represent hybrids of human beings and animals such as swans, snakes, or donkeys. As breasts develop into feet, beaks turn into

⁸⁶ See Klaus FERENTSCHIK / Peter GORSEN, *Friedrich Schröder-Sonnenstern und sein Kosmos*, Berlin 2013, 15–17.

⁸⁷ See BADER, *Geisteskranker*, 17; Pamela KORT, *Friedrich Schröder-Sonnenstern*, Exhib. Cat. Gallery Michael Werner, New York 2011, n. pag.

⁸⁸ See KRAFT, *Grenzgänger*, 212 f.

⁸⁹ See FERENTSCHIK / GORSEN, *Friedrich Schröder-Sonnenstern*, 52 f.; KORT, *Friedrich Schröder-Sonnenstern*, n. pag.; BADER, *Geisteskranker*, 42 f.

⁹⁰ See KRAFT, *Grenzgänger*, 213; BADER, *Geisteskranker*, 30.

hands, and genitalia form faces, he stripped the human beings of their humane characteristics and turned them into animals by using methods of stylisation, brutalisation and demonisation.⁹¹ Using these stylistic features, the artist addressed topics like sexual intercourse, bodily functions, and disparities between males and females, good and evil, weak and strong, or life and death, in order to deal with basic human themes.⁹² They are integrated in Schröder-Sonnenstern's ideas about the relations between culture and nature or the dispute between rulers and ruled, whose inner contradictions and dichotomies he addressed by using strategies of assimilation and transformation. Two topics in particular caused a public association of his works with mad art, namely his depictions of sex and violence.⁹³

3.2.2 Art as a Type of Therapy in Friedrich Schröder-Sonnenstern's Life – His Ideas of Sex and Violence

The use of art as a therapeutic tool within Schröder-Sonnenstern's life is of particular interest considering his oeuvre is divided into two barely related creative periods, only one of which he spent in psychiatric clinics. According to Bader, who declared Schröder-Sonnenstern's works as psycho-pathological art due to his strategies of deformation and brutalisation, the artist may have used creative activity to conduct self-healing in the clinic. This is evident when looking at a black-and-white drawing he created during the winter months of the years 1933 and 1934.⁹⁴ The *Gefangener Nr. 28 von einem Eisbären zerrissen? Am 13.1. begraben... und das alles mit lächelnder Miene!* (Figure 3) shows a man, composed of two hearts representing his upper and lower body, lying in a glass coffin while church bells are ringing. The bell rope leads directly to his heart, which is replaced by a black cross. Serpentine lines pass through his body and head, which could represent either nerves or electric shocks, since the man opens his eyes to fix on the observer, as if he were in pain. This impression is intensified when looking at his torso, which is pierced by a rod that sticks out of the box.

From a critical reader-response perspective, the man in the coffin functions as a figure of identification, as he directly communicates his pain to the observer, reminding him of people buried alive who blamed individuals or institutions for their treatment. Although conflicts between the artist and the Christian church are not known, Schröder-Sonnenstern might have

⁹¹ See KRAFT, *Grenzgänger*, 217; FERENTSCHIK / GORSEN, *Friedrich Schröder-Sonnenstern*, 181, 183, 185; GORSEN, *Friedrich Schröder-Sonnenstern*, 363.

⁹² See BADER, *Geisteskranker*, 100f; KRAFT, *Grenzgänger*, 216.

⁹³ See FERENTSCHIK / GORSEN, *Friedrich Schröder-Sonnenstern*, 194 f; BADER, *Geisteskranker* 100.

⁹⁴ Measurements and provenance are not known: BADER, *Geisteskranker*, 44 f., 98 f.

replaced the heart with a cross in order to criticise the Catholic community, which he did not consider to be the only forum for facilitating redemption; he wanted to counter this with the ideology he developed during his time as a cult leader. At the same time, it is remarkable that Schröder-Sonnenstern integrated two symbols representing judicial paragraphs in the figure's genital region, suggesting that he wished to demonstrate his scorn for the law and its constraints as well.⁹⁵ Within this context, it is interesting that Schröder-Sonnenstern characterised the figure as a prisoner, who he stripped of his identity and personality by addressing him as prisoner number 28.

In this respect, it seems likely that the artist was trying to cope with his multiple imprisonments, which not only limited but in some cases "buried" his opportunities alive. In addition, he confronted their consequences, namely the transfer to mental health facilities where he was branded a criminal maniac and social misfit. Thanks to the drawing's title, the beholder is aware of the man's cause of death: an attack by a polar bear. As bears are symbols of menace and force,⁹⁶ Schröder-Sonnenstern might have wanted to underline the superior power of the state and its institutions, like courts or hospitals, which 'attacked' him like a wild animal and locked him away from society. Although the drawing's stylistic devices do not allow definite conclusions on the use of art as therapy during his stay in the clinic, the example shows that Schröder-Sonnenstern addressed topics like social exclusion and coercion to deal with his compulsory hospitalisation.

The paintings emerging within his second creative period convey different impressions, as in *Der Friedenshabicht führt den Friedensengel zum Elysium* (Figure 4), which was created in 1953. Preserved in the *S. u. G. Poppe collection* in Hamburg, and measuring 73 x 102 cm,⁹⁷ it depicts a red winged dragon, which is biting with its beak-shaped jaw an angel in the shape of a woman. Although the demonic creature holds a green palm signalling peaceful intentions, it steps forward with its birdlike claws, revealing massive buttocks and sinking its teeth into the woman's flesh. She is unable to escape from the dragon and screams out in agony. As the title suggests, the dragon is meant to represent a peaceful goshawk which is leading an angel of peace to Elysium, the Roman equivalent of the Christian paradise.⁹⁸ Yet, the hawk has also been associated with power and superiority towards fellow animals and humans since

⁹⁵ See BADER, *Geisteskranker*, 45.

⁹⁶ See WETZEL, *Lexikon*, 34.

⁹⁷ See BADER, *Geisteskranker*, 126.

⁹⁸ See Herbert J. ROSE, *Griechische Mythologie. Ein Handbuch*, 2nd edition, Munich 2007, 73.

antiquity, as Greek fables described it as a predatory animal haunting smaller birds. In Hesiod's writings, the hawk is portrayed as a beast which holds the nightingale captive with his teeth,⁹⁹ an image that is also present in Schröder-Sonnenstern's painting. Therefore, the title's suggestion to view the hawk as a peaceful animal is actually a deliberate provocation.

When looking at the hawk's and angel's attributes, it becomes clear that the provocation's target is the Christian church. The hawk praises itself for bringing peace by holding a palm branch, a symbol for quietude and victory since the early Christendom, but it hurts the angel on purpose. This impression becomes more concrete when looking at the animal's red colour, which is a symbol for hatred, violence and destruction¹⁰⁰ and can also be associated with the devil, thereby equating the demon with the Christian church. This becomes evident when looking at the anchor the angel of peace is wearing, a symbol which has been associated with safety since antiquity to portray faith, hope and – within Christian contexts – a belief in stability.¹⁰¹ However, it is precisely this feeling that the angel has lost, as the devil symbolizes the Christian church robbing it of its sense of security. This feeling is directly transported to the observer, who finds a figure of identification with the angel, who sets its eyes on him, thus making him a sympathetic witness to the crime the devil – in this case, the Christian church – is committing.

Although the content of Schröder-Sonnenstern's critique is not blatant, he may have wanted to point towards the violence employed by representatives and members of the Catholic church over the centuries (for example, during missions where they tried to make people aware of the Christian Elysium by force). Alternatively, he may have been trying to address the churches' prude ideas of sexual morals, as he provided the angel and the hawk with out-sized sexual characteristics. While the hawk, with its pronounced breasts and buttocks, seems like a female, the angel appears androgynous, as its genital area is not defined, the breasts seem like buttocks and the face is decorated with phallus-like snakes forming nose, cheeks and forehead. With this highly sexualised depiction, the artist may well have wanted to provoke the Christian church as an institution, which preached traditional values such as the condemnation of premarital intercourse, abortion and chastity for its representatives, but at the same time neglected and denied the sexual and moral abuse some of them committed.

⁹⁹ See Henning OTTMANN, *Geschichte des politischen Denkens. Von den Anfängen bei den Griechen bis auf unsere Zeit*, Vol. 1: Die Griechen, Subvol. 1: Von Homer bis Sokrates, Stuttgart / Weimar 2001, 50 f.

¹⁰⁰ See WETZLER, *Lexikon*, 232, 264.

¹⁰¹ See *ibid.*, 12.

Following on, it is quite unlikely that Schröder-Sonnenstern used the paintings of his second creative period in an art-therapeutic way. Instead, he seems to have employed them to attack the Christian church and its depraved sexual morals, as he admitted that he enjoyed “being oppositional” towards institutions and the state.¹⁰² Therefore, the grotesque content and brutalised figures cannot be identified as evidence of mental insanity, but rather as a means of criticizing the bigoted moral system of the post-war era. Although art might have helped him to deal with his situation in the 1930s, as his depiction of prisoner number 28 suggests, there is not a single instance where Schröder-Sonnenstern reflected on the psychiatry’s building, his medical supervisor or mental illness, so he did not try to deal with the psychiatric clinic as a habitat at all. Instead, he concentrated on topics like exercise and misuse of power in institutions, which are linked to the themes of the second phase. To make his observers aware of his work, he needed to fall back on hybrid creatures¹⁰³ and his apparent mental disorder as a marketing strategy.¹⁰⁴

3.3 Life, Work and Illness of Oswald Tschirtner

3.3.1 Oswald Tschirtner’s Biography, Anamnesis and Artistry

Oswald Tschirtner was born in 1920 in Perchtoldsdorf into a strictly Catholic family. After having initially wanted to pursue a clerical career, which became impossible due to the government’s antireligious mindset after the so-called “Anschluss” of 1938, he studied chemistry until he was forced to serve as a radio operator for the National Socialist news and communication service in Stalingrad. Although Tschirtner managed to flee the Russian war zone, he was captured by French soldiers and had to work in a prisoner-of-war camp before he was able to return to Austria in 1947. After having developed post-traumatic stress disorder, he was diagnosed with schizophrenia and had to undergo permanent psychiatric treatment¹⁰⁵ from 1954 onwards. He was then committed to the *Landesnervenklinik Gugging*, where he lived as a successful, internationally recognised artist in the *Haus der Künstler* until his death in 2007.¹⁰⁶

¹⁰² See Eberhard SIMONS, *Narren, Hexen und Dämonen. Die tragische Komödie des Friedrich Schröder-Sonnenstern*, in: Irene Maeder, ed., *Friedrich Schröder-Sonnenstern*, Munich 1987, 7–24, here 12.

¹⁰³ See Roger CARDINAL, *Outsider Art*, London 1972, 154 f.

¹⁰⁴ See GORSEN, *Friedrich Schröder-Sonnenstern*, 361.

¹⁰⁵ See ANSPERGER, *Tschirtner*, 300; KRAFT, *Grenzgänger*, 199.

¹⁰⁶ See Leo NAVRATIL, *Die Künstler*, in: Leo Navratil, ed., *Die Künstler aus Gugging*, Exhib. Cat. Museum Moderner Kunst Wien, Salzburger Landessammlung Rupertinum, Kunstamt Wedding Berlin, Heidelberger Kunstverein,

Tschirtner's first drawings date from the 1950s when his psychiatrist Leo Navratil tested art-therapeutic methods within the treatment procedure and motivated Oswald to become artistically active. Although Tschirtner never resisted any instigation Navratil made about timeframes or topics, he did not show self-initiative and only regularly engaged in drawing after the early 1970s, when his works achieved a breakthrough due to his first international exhibitions. As Tschirtner was pleased when the clinical staff observed his actions and provided him with models to imitate or develop further, the persona of the psychiatrist gained great influence during his productive periods. This process is called *art à deux* and has entered into the research about *Art Brut* after Tschirtner's way of working had become known. The latter's oeuvre is nearly entirely restricted to small-sized, inanimate ink drawings that occasionally uses colours and texts. It is characterised by abstract and minimalistic design, techniques that rely on mechanisms of automatisisation¹⁰⁷ and a neglect of details.¹⁰⁸ His most recurring stylistic device and motif is the head-footer, a misproportioned human being consisting of a head with eyes, nose, mouth, hair, ears and four oversized legs, but lacking a torso and sexual organs. As Navratil gave Tschirtner thematic tasks such as the human being's interaction with nature or fellow individuals, the head-footers can also be accompanied by items like clothing, everyday objects, plants, or animals. Besides these schematised works, Navratil's successor Feilacher encouraged Tschirtner to reflect on subjects that affected him emotionally – religion and the Catholic faith – in order to liberate him from the pressure of being obliged to draw.¹⁰⁹

3.3.2 Art as a Type of Therapy in Oswald Tschirtner's Life: His Vision of the Catholic Faith

One of the ink drawings dating from the creative period after Tschirtner's recognition as an *Art Brut* representative that rudimentarily motivated him to draw more often, is called *Das Jüngste Gericht* (Figure 5). Measuring 21 x 15 cm, it was made in 1972. Preserved in the *Museum moderner Kunst (Mumok)* in Vienna,¹¹⁰ it shows a tall self-contained, unemotional head-footer with a stylised crown on its head. It sits on a podium in the middle of a crowd of small head-footers, who eagerly turn to the left or the right, as if they are awaiting a decision or event. As

Neue Galerie der Stadt Linz, Wolfgang-Gurlitt-Museum, Aargauer Kunsthaut Aarau, 2nd edition, Vienna 1983, 49–396, here 334; ANSPERGER, Tschirtner, 301.

¹⁰⁷ See ANSPERGER, Tschirtner, 297–299, 301; FINK, Kunst, 18.

¹⁰⁸ See Johann FEILACHER, Oswald Tschirtner & Johann Hauser... Mit Strich und Farbe, in: Nina Katschnig, ed., Oswald Tschirtner & Johann Hauser... Mit Strich und Farbe, Exhib. Cat. Galerie Gugging 2016/2017, Maria Gugging 2017, n. pag.

¹⁰⁹ See NAVRATIL, Künstler, 334 f.; ANSPERGER, Tschirtner, 297–299.

¹¹⁰ See NAVRATIL, Künstler, 342.

the title Tschirtner chose reveals, the central head-footer can be identified as Jesus sitting on the throne during the Last Judgement, a concept the artist was familiar with since childhood. Jesus is in the process of deciding about who is going to be accepted in heaven or who has to pay a bitter penance for their sins in hell. While the head-footers at the back of the drawing lean towards the right side, which is traditionally seen as the good and salutary one,¹¹¹ indicating that they will be delivered from hell, the ones at the bottom lean to the left and therefore will spend their afterlife suffering from infernal punishments.

The questions as to why Tschirtner chose this topic and if he identified with one of the head-footers cannot be answered fully. There are no known details about the status of the Last Judgement within his religious thinking and, in the picture, none of the head-footers makes contact with the beholder. Tschirtner might have chosen the Last Judgement as a motif because of his experiences in Stalingrad which might have made him feel like he had arrived at a place where this event could happen. Nevertheless, because he refrained from including unambiguous symbols of war or martial conflicts, it is not clear whether he used the pictures to cope with the scars the Second World War had left in him, both what he saw in Stalingrad and the consequences of these experiences (the confinement in a mental health facility and the loss of his chance to become a priest). Moreover, while the drawing's stylistic features, such as the high degree of deformation and simplification or the urge to fill every corner of the paper, can be interpreted as signs of his fight against the mental illness, they need not be read as clear evidence that Tschirtner saw the drawing as a means of art therapy. Although these devices offer stability, tranquillity and orientation, he could just as well have wanted to express his strong faith and attraction towards Christianity, for which the Last Judgement is crucial.

It is also plausible to relate the Christian faith to Tschirtner's illness when interpreting the ink drawing *Schutzmantelmadonna* (Figure 6), made in 1972 and measuring 21 x 15 cm. Liewise preserved at the *Mumok* in Vienna,¹¹² it shows a tall head-footer, which opens its limbs like a huge coat for six rows of smaller head-footers who seek shelter underneath it, although there is no danger visible. Unlike in the *Last Judgement*, the protagonist, who resembles the Christian Virgin of Mercy, sets his eyes directly onto the beholder to communicate the safety and love it can supply him with when he seeks shelter there as well. Within Tschirtner's religious thinking, the Virgin of Mercy must have played an important role, as it may have calmed

¹¹¹ See Ursula DEITMARING, Die Bedeutung von Rechts und Links in theologischen und literarischen Texten um 1200, in: *Zeitschrift für deutsches Altertum und deutsche Literatur* 98/4 (1969), 265–292, here 268.

¹¹² See NAVRATIL, *Künstler*, 343.

him down and made him feel safe from the horrors of the Second World War and their consequences for his professional and private life. Given it is recorded that, during his first hospitalisation, Tschirtner found strength to carry on through the bible and Christian prayers,¹¹³ the drawing *Schutzmantelmadonna* is a prime example for the therapeutic meaning religion played within his life after the diagnosis of his illness. Therefore, this work cannot be exclusively interpreted as a therapeutic tool from an art-historical perspective, but must be seen as proof of how Tschirtner found strength and stability within the Catholic faith and how it was rather the content than the medium that functioned as a healing device.

Consequently, it is unlikely that Tschirtner discovered the potential art could have had for him to heal or ease his anxieties and traumata, although all of his works emerged within an institutionally anchored art-therapeutic setting. Because he did not originally direct his interests towards art, he needed instead to develop formalised patterns to fulfil Navratil's tasks. By developing the head-footer, he concocted a general, reusable, and simple figure that he could adapt to different contexts. Hence, Hartmut Kraft has interpreted his stylistic devices as born out of "emergency solutions which reveal the distress of the drawer"¹¹⁴. For Tschirtner, art was more a technique and means to an end than a medium for self-recovery, let alone a tool for shaping the psychiatric clinic as a habitat.

4. Psychiatric Clinics as Total Institutions – Art as a Strategy for Expressing Autonomy and Self-Determination

In order to detect whether psychiatric patients could use art to express self-determination and autonomy, the above-mentioned case studies are contextualised with the concept of Total Institutions formulated by sociologist Erving Goffman in 1961. In his paper, *Asylums. Essays on the Social Situation of Mental Patients and Other Inmates*,¹¹⁵ he examined social structures, hierarchies and forms of interaction in facilities of "social arrangements",¹¹⁶ such as prisons, military camps, monasteries or psychiatric clinics.¹¹⁷ These institutions serve as storage places for groups of people who have been abandoned from society due to health, safety, military or

¹¹³ See Robin PAPE, Tschirtner, Oswald. Österreichischer Künstler und Anstaltsinsasse, digitally available via: Biographisches Archiv der Psychiatrie, <https://www.biapsy.de/index.php/de/9-biographien-a-z/146-tschirtner-oswald>, (10.02.2020).

¹¹⁴ KRAFT, Grenzgänger, 201.

¹¹⁵ See GOFFMAN, Asyle, 1973.

¹¹⁶ Ibid., 7 f., 15.

¹¹⁷ See Martin SCHEUTZ, „Totale Institutionen“: missgeleiteter Bruder oder notwendiger Begleiter der Moderne?. Eine Einführung, in: Martin Scheutz, ed., Totale Institutionen (Special Issue: Wiener Zeitschrift zur Geschichte der Neuzeit 8/1 (2008)), 3–19, here 5.

religious reasons and are equally forced to follow the rules of a bureaucratic superstructure that uses mechanisms of mortification to control them.¹¹⁸ After restricting the patients' contact to the outside world, the institutional staff strips them of their former roles, professions, legal rights and socio-economic status, a process Goffman called "civil death"¹¹⁹. They depersonalise them by removing all traces of individuality, treating them as numbers and dispossessing them by using mechanisms of humiliation and punishment to erode their dignity (for example, by turning personal activities such as bodily hygiene, sleeping or eating into a public matter). As the patients' self-determination, autonomy and freedom of action is heavily restricted,¹²⁰ they are forced to work, live, sleep and eat in the same place by cooperating with groups of fellow inmates who are in exactly the same situation. At the same time, they are controlled by the same authorities, who set timelines and goals, which serve the institution economically, increase social security and provide inmates with educational and religious training.¹²¹

In order to deal with the new circumstances, inmates can isolate themselves by going into an inner emigration, rebel against their treatment, or simply accept the situation. While some inmates lead a happy life within the institutions by denying their misery, the majority formally puts up with being physically - and in some cases also mentally - controlled and distances itself by expressing independence on an intellectual level.¹²² All three artists within this study were committed to a total institution, which restricted their contact to the outside world, controlled their daily routine and stripped them of their former status and professions. Nevertheless, it must also be considered what status the particular facility had in the respective country and psychiatric landscape, whether it was private or state-owned, and what influence this had on methods of treatment, in order to find out whether the persons concerned could use art as a tool to express self-determination and autonomy.

Adolf Wölfl spent more than 30 years in the *Waldau asylum*, one of the first psychiatric clinics in the Canton of Berne, which was administered by the Basle psychiatrist Wilhelm von Speyr between 1890 and 1933. He was convinced that the ideal treatment consisted of regular participation in occupational therapy, lying in bed for many hours, and isolation, a factor which was promoted by the remote area the Waldau was situated in. Ignoring the innovative

¹¹⁸ See Benny GOODMAN, Erving Goffman and the Total Institution, in: *Nurse Education Today* 33 (2013), 81–82, here 81.

¹¹⁹ GOFFMAN, *Asyle*, 26.

¹²⁰ See SCHEUTZ, *Institutionen*, 6; GOODMAN, Erving Goffman, 81; GOFFMAN, *Asyle*, 26 f.

¹²¹ See Dominique KARNER, *Totale Institutionen. Psychiatrien im 19. Jahrhundert am Beispiel der k.k. Provinzial-Irren-Heilanstalt Hall in Tirol*, in: *historia scribere* 8 (2016), 27–43, here 32; GOFFMAN, *Asyle*, 17, 86 f.

¹²² See SCHEUTZ, *Institutionen*, 7 f.

methods that reached psychiatric institutions around 1900, he supported outdated measures¹²³ like the confinement in a solitary cell that Wölflli had to endure for 30 years. Speyr hereby restricted not only Wölflli's contact with the outside world, but also his possibilities to move around in the building itself. He was only allowed to stay in one room. By becoming creatively active, Wölflli had the chance to widen his geographical radius and to get rid of physical restrictions. This is evident when looking at his drawing *Die Assisen des Mittellandes*, where he referred to a different local area or his depiction of the asylum building, a prospect he did not see often. Furthermore, Wölflli collected posters and newspapers showing landscapes, advertisements and other customs. He also created geographical notebooks in which he travelled as the child Doufi through the world and bought the places he visited to fill them with infrastructure and institutions.¹²⁴ Besides these local and geographical restrictions, Wölflli also fought against institutional cooptation and depersonalisation by becoming artistically active, as he exclusively dedicated himself to creational activity and perceived himself as a professional artist who sold his own works and drew and painted whenever he liked, without taking account of clinical schedules.

In contrast, the works Friedrich Schröder-Sonnenstern created in the psychiatric clinic *Neustadt* in Holstein leave an ambiguous impression. As there are no details known about his treatment in the institution, it is difficult to prove that Schröder-Sonnenstern wanted to fight against local restrictions and social isolation. However, his fiancée Martha sent letters to the clinic's administration on behalf of his release and Schröder-Sonnenstern wrote complaints to the local authorities after his referral for psychiatric treatment.¹²⁵ As it was one of the facilities most loyal to the policy of the state and the county's government,¹²⁶ a characteristic Schröder-Sonnenstern despised due to his hatred of institutions, it seems likely that he wanted to leave it as soon as possible. Aside from his need to be recognised by others and not to be equated with fellow inmates, he must have felt like a prisoner, an impression that intensifies when looking at the drawing about prisoner number 28. Nonetheless, he told Martha that he enjoyed his stay and wanted to live in the psychiatric clinic even longer, because he found there the strength, quietness and time to become creative and – as his interaction with the insane painter

¹²³ See Martina WERNLI, *Schreiben am Rand. Die „Bernische kantonale Irrenanstalt Waldau“ und ihre Narrative (1855–1936)*, Bielefeld 2012, 21 f.

¹²⁴ See SPOERRI, Adolf Wölflli, 20 f.

¹²⁵ See FERENTSCHIK / GORSEN, Friedrich Schröder-Sonnenstern, 52.

¹²⁶ The Landesheilanstalt Neustadt is known for willingly cooperating with the Nazi regime in conducting the euthanasia programme. For further information have a look at: Bettina SCHUBERT, *Psychiatrie im Wiederaufbau. Das Landeskrankenhaus Neustadt in Holstein zwischen Euthanasie-Aktion und Reform*, PhD thesis, Lübeck 2017, 1.

shows – the conditions for professional art production must have existed.¹²⁷ Therefore, it remains an open question as to whether Schröder-Sonnenstern used art as a means to express autonomy and self-determination within his new environment.

Compared to Wölfli and Schröder-Sonnenstern, Oswald Tschirtner's situation in the clinic at Gugging was completely different and issues restriction and isolation were not a matter that concerned the artist. As Tschirtner was deliberately encouraged to become artistically active within art-therapeutical contexts and was even able to move into a house that dedicated to the creative patients living in Gugging, it is unlikely that he felt the need to express autonomy and self-determination through art. As Navratil emphasised in his writings, the patients could become artistically active whenever and wherever they liked, they could sell their works and were therefore not equated with other psychiatric patients.¹²⁸ Hence, the clinic in Gugging can be interpreted as the opposite of a socially, creatively or mentally restrictive institutional setting. Indeed, the fact that Tschirtner's psychiatrists often convinced him to become artistically active might have even caused an opposite effect. As Hartmut Kraft has demonstrated, Tschirtner felt the need to please his psychiatrist and started drawing in order to follow Navratil's wishes, but he was never fully able to grasp the potential art might have had for his personal needs and healing process. Instead of viewing art as a means to express autonomy and self-determination within the institution, he may even have seen it as stressful and as an external intervention. This not only questions the function of art as a liberating tool, but also widens scholarly approaches to art therapy.

5. Conclusion

After works created by psychiatric patients had been institutionally embedded in the 20th century art scene due to Dubuffet's and Navratil's publications about *Art Brut* and *Zustandsgebundene Kunst*, psychiatric clinics could establish themselves as places of art production and entered into scientific discussion about connections between mental illnesses and creative activity and the function of art in extreme situations. The question as to whether - and to what extent - psychiatric patients used art as a tool to treat their psychoses was at the centre of the process of recognising psychotic art, as this article has examined, taking the German-speaking countries as examples.

¹²⁷ See BADER, *Geisteskranker*, 21–24.

¹²⁸ See NAVRATIL, *Einleitung*, 33.

The Swiss schizophrenic Adolf Wölfli definitely used art as therapy in order to come to terms with his referral to the Waldau asylum, after being convicted of several attempts at sexual assault on minors. By depicting the asylum's building, his trial and lifelong imprisonment and by using stylistic features like an ornamental style and sexualised elements, he fought against paranoia and communicated with the beholder to try and make him understand his actions. By contrast, the second case study, Friedrich Schröder-Sonnenstern, used art as a therapeutic tool on a narrative level while he spent six months in an asylum in Neustadt by addressing feelings of social exclusion, and emotional and physical confinement. However, he set himself free from the stylistic and motific features of his early works when he became a professional artist in the 1950s. From then on, he used art to provoke, shock, scare and confront institutions like the Catholic church with its ambiguous moral standards, instead of trying to heal his psychoses. His intentions completely differed from the ones shown by Oswald Tschirtner in the *Haus der Künstler* in Gugging. Tschirtner never deliberately used art as therapy. Although there are topics in his oeuvre that might be interpreted as trying to express desires and wishes, Tschirtner felt forced to draw by others and he needed thematic instructions to become creatively active, instead of discovering the healing potential of art.

Proceeding from these comparative analyses, it becomes clear that the reasons, intentions, backgrounds, and circumstances of how and why artists became creatively active within psychiatric clinics in the 20th century were varied. While some of them used art as therapy, others drew or painted to keep themselves occupied, to please their institutional environment, or to meet with the clinical staff's and the psychiatrists' expectations. Within these contexts, art also functioned as a means to exert autonomy and self-determination, because it offered the patients the opportunity to liberate themselves from local entities, to raise themselves above other patients by individualising themselves, to criticise their environment and to decide actively about contents, styles and timelines. Especially in the case of Adolf Wölfli and partly in the case of Friedrich Schröder-Sonnenstern, art was a means of achieving fruition and acted more or less as a lifesaving device within total institutions.

Figures



Figure 1: Adolf Wölfli, *Die Assiisen des Mittellandes*, 1904, Black-and-white drawing, 99,5 x 74,5 cm, Art museum Berne



Figure 2: Adolf Wölfli, *Waldau asylum*, 1921, coloured pencil drawings, measurements unknown, provenance unknown

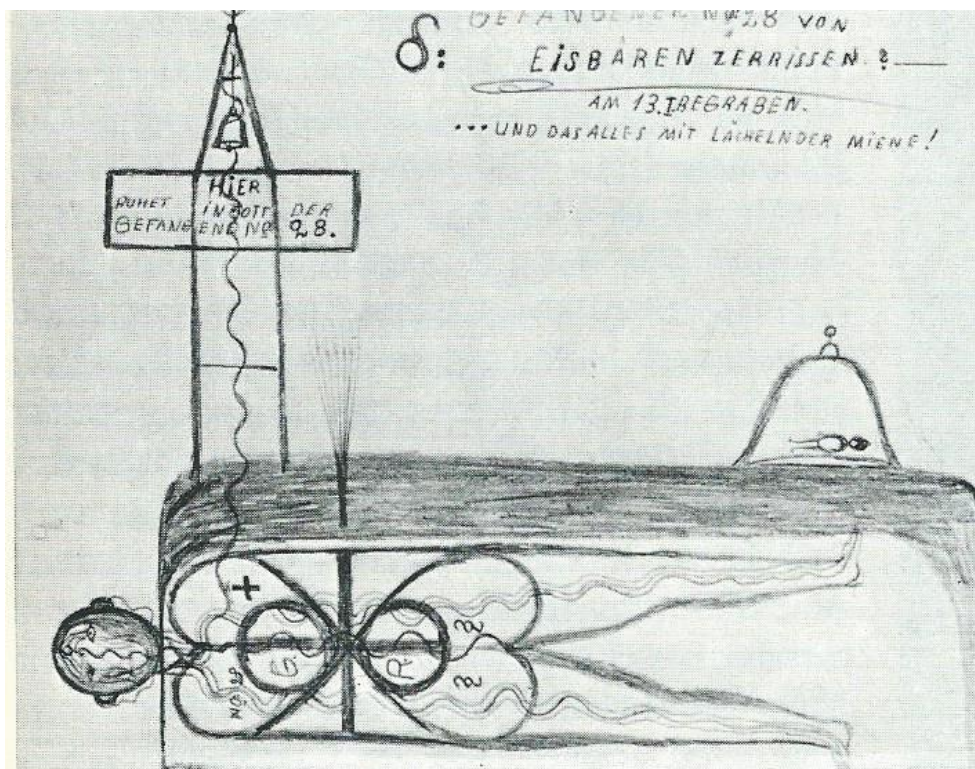


Figure 3: Friedrich Schröder-Sonnenstern, Gefangener Nr. 28 von einem Eisbären zerrissen? Am 13.1. begraben... und das alles mit lächelnder Miene!, 1933/34, Black-and-white drawing, measurements unknown, provenance unknown

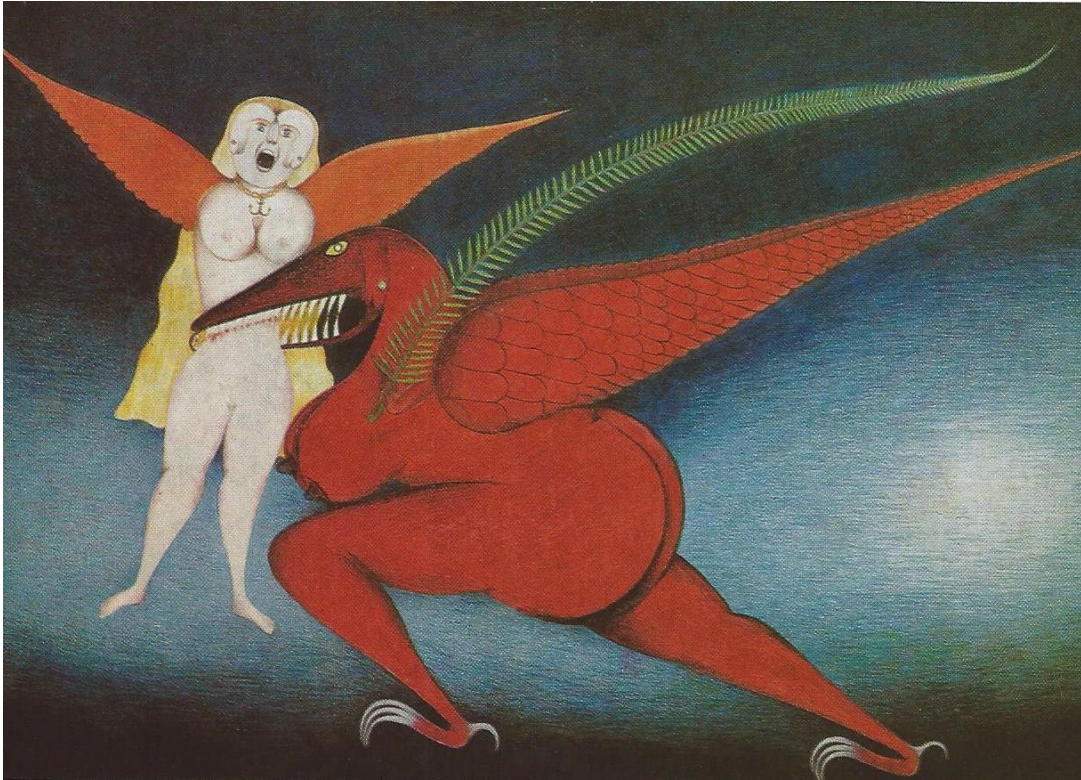


Figure 4: Friedrich Schröder-Sonnenstern, *Der Friedenshabicht führt den Friedensengel zum Elysium*, 1953, coloured pencil drawing, 73 x 102 cm, S.u.G. Poppe collection Hamburg

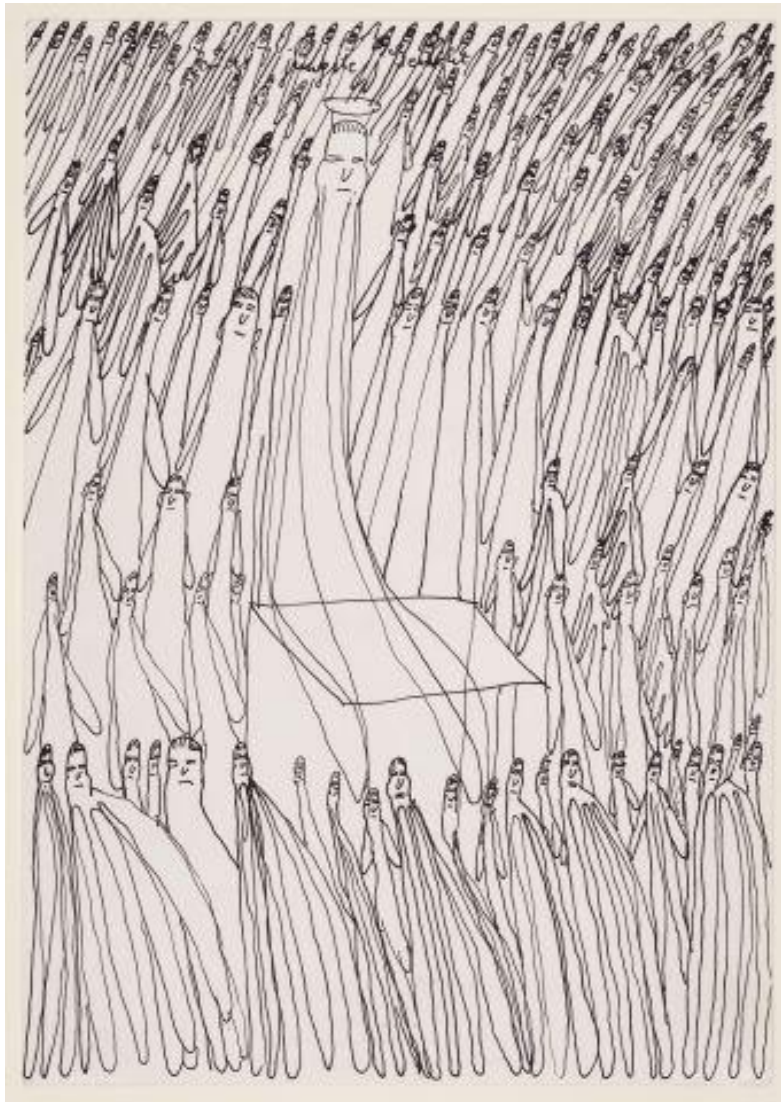


Figure 5: Oswald Tschirtner, *Das Jüngste Gericht*, 1972, ink dra-wing, 21 x 15 cm, Mumok Vienna, Foto @mumok - Museum moderner Kunst Stiftung Ludwig Wien, Schenkung Die Künstler aus Gugging, Sammlung Leo Navratil.

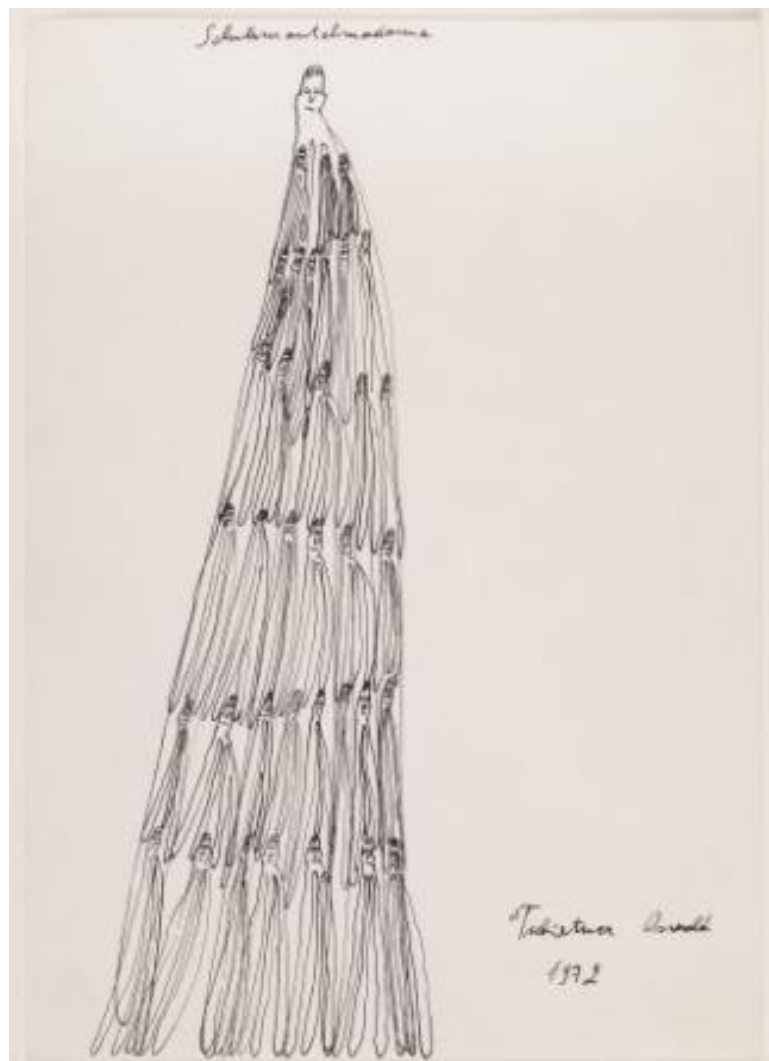


Figure 6: Oswald Tschirtner, Schutzmantelmadonna, 1972, ink drawing, 21 x 15 cm, Mumok Vienna, Foto @mumok - Museum moderner Kunst Stiftung Ludwig Wien, Schenkung Die Künstler aus Gugging, Sammlung Leo Navratil.

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