A Major Project Proposal

Creating Community: A Mosaic Art Project With Adults Who Have Autism

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Introduction

This is a proposal to develop and implement a community art therapy project with the Salvation Army Lawson Ministries Autism Centre in Hamilton, Ontario. The project involves designing and creating a mosaic tile mural with adults who have Autism Spectrum Disorder and publicly exhibiting the completed artwork. The process of the project as it unfolds will be captured in a short documentary video to be publicly screened at the unveiling of the mosaic mural. These three activities - creating a mosaic mural, producing the video, and the public exhibition are all important elements in this community-based art therapy project.

Problem

The mosaic art project will attempt to address some of the therapeutic needs, as well as psychosocial and systemic issues affecting adults with Autism Spectrum Disorder (ASD). The broad therapeutic needs of adults with autism involve challenges with verbal language and communication, social and relational interactions and sensory sensitivities. Psycho-social issues can include depression and anxiety related to or exacerbated by social isolation and lack of meaningful opportunities and appropriate supports (Stoddart et al., 2013). Systemic issues include the lack of public policy and public resources for adults with ASD, as well as the broader community’s lack of awareness of the needs and the potential of adults with ASD in contrast to children with the same disorder (Peacock, G, 2003; Stoddart et al., 2013). Without more attention given to adults with autism this population remains at risk of serious neglect resulting in an increase in already poor psychosocial outcomes (Stoddart et al., 2013) and without opportunities to reach their full potential. Adults with autism need opportunities for verbal and creative self-expression, inter-personal skill development, and meaningful inclusion and engagement with the broader community. The activities in this project aim to support individual
and collective development in these areas and to share with the broader community the gifts, abilities, and experiences of the participants as artists. The project builds on the success of Lawson Ministries’ Paparella Innovative Art Program, which has provided art classes for adults with ASD since 2008 and wants to expand its experience with art therapy. Information about the Paparella Innovative Art Program can be found at http://www.lawsonministries.org/services.html (Salvation Army Lawson Ministries, 2012).

The mosaic project will introduce a new art medium and approach - working with very concrete, tactile materials and concepts, which will present new opportunities and challenges for participants. It will involve a sustained effort over many weeks and require participants to work in a collaborative context towards a collaborative outcome. Social skills and self-regulation will be modeled and supported while taking each individual’s unique capacities and needs into account. Mosaic art involves stages and processes that require fine motor, cognitive, and visual processing skills, as well as the use of imagination and creativity. Adults with autism benefit from ongoing development in all of these areas (Stoddart, 2013; Martin, 2009). It also requires focus and concentration on a specific and repetitive task which is often a strength of those with ASD.

**Research Question**

Does participation in the mosaic art project enhance the skills of adults with autism, and what effect if any, does the public art exhibition and video screening have on participants and on the broader community?

The research question reflects the three elements of the mosaic project; the mosaic art making, the public art exhibition, and the production of a documentary video to increase awareness of adults with autism and the use of art therapy to support them. The individual skills
the project aims to enhance are communication and social skills, flexibility and collaboration, the use of imagination and creativity, as well as self-regulation fine motor skills. The research will also explore whether modifications in group processes or use of materials are required to support participants and generally how participants respond to the new art media and facilitator. Feedback from family and community members who attend the exhibition and view the video will also be sought.

**Rationale (Contribution to Art Therapy Profession)**

This major project will contribute to the profession of art therapy by raising awareness of the needs of adults with autism that can be met through art therapy. There is a robust body of literature on art therapy for children with autism reflecting the fact that in general research and resources are disproportionately directed to young children. However, the exponential increase in young children diagnosed with ASD over the past few decades has begun to translate into adults with autism who remain in need of ongoing supports and opportunities. (Stoddart et al., 2013; Peacock, G. 2003; Autism Research Institute, 2014). Autism is not curable and the need for self-expression, communication and connection remains profound throughout the lifespan. The mosaic art project hopes to raise awareness of the needs of adults with autism and the potential for art therapy to address them.

The project will promote the profession of art therapy locally through the public art exhibition and screening of the video, and internationally by way of free access to the video on the Salvation Army Lawson Ministries website. The principal investigator may also present project findings at professional conferences or in educational contexts. Sharing the project through these various venues may motivate art therapists and art therapy students to consider
working with autistic adults in a group context or through specific project initiatives and may also inspire further research.

Finally, this project will contribute in a small way to an increasing practice in the field of expressive arts therapies of developing community engaged initiatives such as public exhibitions or performances (Concordia University, 2014; Kaplan, 2007; Thomson, 2012). These initiatives are considered part of the healing and therapeutic work with populations where social isolation, exclusion and stigma exist, or where the root causes of peoples emotional distress are embedded in social systems or the social determinants of health (World Health Organization, 2014). The inclusion in this project of a public exhibition and video documentation where individuals can choose whether to participate or not and whether to remain anonymous or not, reflects this emergent and post-modern practice of sharing parts of the art therapy journey with the public.

**Definition of Terms**

**Autism Spectrum Disorder.**

In 2013 the American Psychological Association revised the diagnostic criteria for Autism Spectrum Disorder in the Diagnostic and Statistical Manual of Mental Disorders, 5th Ed. (American Psychological Association, 2013). The diagnostic criteria defines symptoms, a guide for assessing the severity of symptoms and examples to assist in the assessment. Severity is based on social communication impairments and restricted repetitive patterns of behavior. The following is summary of the diagnostic criteria; the full diagnostic criteria can be viewed at: [http://www.autismspeaks.org/what-autism/diagnosis/dsm-5-diagnostic-criteria](http://www.autismspeaks.org/what-autism/diagnosis/dsm-5-diagnostic-criteria)

Autism Spectrum Disorder:

A) Persistent deficits in social communication and social interaction across multiple contexts:

- for social purposes,
- in non-verbal communicative behaviours and,
• in developing, maintaining and understanding relationships.

B) Restricted, repetitive patterns of behavior, interests, or activities, as manifested by at least two of the following:

• Stereotyped or repetitive motor movements, use of objects, or speech,
• Insistence on sameness, inflexible adherence to routines, or ritualized patterns or verbal nonverbal behavior
• Highly restricted, fixated interests that are abnormal in intensity or focus
• Hyper or hyporeactivity to sensory input or unusual interests in sensory aspects of the environment

C) Symptoms must be present in the early developmental period.

D) Symptoms cause clinically significant impairment in social, occupational, or other important areas of current functioning.

E) Disturbances are not better explained by intellectual disability or global developmental delay.

Social Determinants of Health.

The social determinants of health include “the conditions in which people are born, grow, live, work and age” (World Health Organization, 2014). The Canadian Government has identified 14 social determinants that affect our physical and mental health. Among these are disability and social exclusion (for full list see Public Health Agency of Canada at http://www.cpha.ca/en/programs/social-determinants/frontlinehealth/sdh.aspx).

Literature Review

Autism

Autism Spectrum Disorder is the current medical term for a developmental disorder first written about in 1943 by psychiatrist, Dr. Leo Kanner after he had identified similar symptoms in children he worked with. His article titled “Autistic disturbances of affective contact,” described individuals with symptoms that remain key features of autism today: being socially withdrawn,
having difficulty with language, obsessive about routines, and repetitive behaviours (Baker, 2013, p.1090). What has shifted over time is an understanding of the etiology of autism. While not yet definitive, it is generally agreed that genetics plays a significant role and researchers are getting closer to unlocking the complex causes. There has been a dramatic increase in the incidence of autism in the past few decades with an ongoing debate about whether the disorder is on the increase or whether the diagnosis is on the increase. After several iterations of the diagnostic criteria in successive versions of the DSM from the 1980’s onwards, in 2013 the DSM-V, created a new category under the umbrella term of Autism Spectrum Disorder (ASD) to include previously separate developmental disorders. As a ‘spectrum’ disorder autism is very complex. As researchers note, “The extreme heterogeneity of ASDs presents challenges for many… the heterogeneity of both abilities and challenges” (Stoddart et al. 2013, p. 10). The prevalence of ASD is estimated to be 1 in 68 with boys being four times more likely to receive the diagnosis than girls (Center for Disease Control and Prevention, 2014).

One of the most striking issues about the literature on autism, is how little of it pertains to adults. (Morgan, 2003; Stoddart, 2013). In 2013, a long awaited and comprehensive study on the needs of adults with ASD in Ontario was published suggesting young adults and adults in general with ASD have significant unmet needs in relation to this complex disorder, and that these needs do not diminish over time but rather there is an increase in experiences of social isolation, stigma and mental health challenges (Stoddart et al., 2013). As the authors state, “The current situation for adults with ASDs - social marginalization, long-term reliance on family and disability income, poor or little access to suitable or knowledgeable services - is untenable” (Stoddart et al. 2013, p.41).
Art Therapy and Autism

The lack of peer-reviewed literature based specifically on adults with ASD requires ‘borrowing’ from the literature on children both in general and in relation to art therapy and autism. Nicole Martin is an art therapist who has extensive experience with autistic children:

“Imagine being chronically over-stimulated, with inadequate communication tools, difficulty focusing, and anxiety – this is the world of a person with autism. Art therapy provides real relief; a visual tool for communication, a window to the imagination, and a motivation to make connections.” (Martin, 2013)

Martin identifies six specific treatment goals for children with autism that she believes can be addressed through art (2009a p. 65). They are:

1) imagination and abstract thinking
2) sensory regulation and integration
3) emotional and self-expression
4) developmental growth
5) visual-spatial skills
6) recreation-leisure skills

These treatment goals remain applicable to adults with autism keeping in mind that each individual will be at different places on the spectrum in relation to a variety of abilities and deficits. The materials, processes and specific step-by-step nature of creating a mosaic mural in a group context, very much reflects and builds on the ways that Martin and others suggest are beneficial for those with autism. Art therapist Donna Betts believes that art therapy is an effective approach for “breaking through the barriers of autism” if the art making process unfolds in small, incremental steps” and the focus is on working with the persons strengths (Betts, 2005, p. 26). A great deal of information and support for those dealing with ASD is generated by
practitioners, family members and a multitude of local and national organizations who post emerging practices and articles on the internet in contrast to academic journals that are limited in accessibility (writers and readers). One such site, “Autism after 16” strongly supports the use of art:

“The production of fine art requires visual thinking, a high degree of focused attention, a detail-oriented mindset, and an ability to work in silence & solitude. All of these attributes are characteristic of many adults with ASD. In art, therefore, many find a productive outlet for fixations, and a welcome challenge for their energies.” (C. McGraw, 2011)

**Mosaic Art**

Interestingly, mosaic art making has not been used or written about extensively in the art therapy world. However, it is increasingly popular in community art and socially engaged art practices as well as in the community health and mental health sectors. In 2012, the Centre for Addiction and Mental Health (CAMH) held a three-day open art workshop bringing together clients, family, staff and local community members to collaboratively create several large mosaic tile artworks for one of their buildings. Youth, adults and geriatric clients worked together guided by professional artists. One staff member noted the importance for clients of creating something with permanence and the value of the symbolism that “… it takes many small pieces to build the bigger picture”, which reflects the centre’s approach to their work with clients (Centre for Addiction and Mental Health, 2012). Several community centres and health centres in Toronto have also used large scale indoor and outdoor mosaic murals to bring together groups of people in a creative process that anyone can participate in.
Art Therapy and Public Engagement

This project proposes to connect art therapy with the broader community through a public art opening and exhibition. The intention is to have a positive impact on the participant artists and on the broader community. As an art therapist specializing in autism, Martin notes, “Public interest in art made by people with autism continues to grow. Thanks to the outsider art and disability arts movements artists with autism have generally gained mainstream appreciation” (Martin, 2009, p.188). Brooke, also an art therapist writing on it’s use in relation to those with autism suggests, “These individuals also benefit from viewing their artwork” and in doing so they receive “…deep enjoyment and feelings of detachment from time and place. For such experiences to develop their needs to be a feeling of psychological safety” (Brooke, 2009, p. 73).

The Centre for the Arts in Human Development is part of the Creative Arts Therapies Department at Concordia University in Montreal. The centre works with adults who have developmental disabilities (DD) including autism, using four different modalities of creative arts therapies (music, art, dance, drama) to “promote autonomy, improve self-confidence and social skills, and enhance the overall quality of life for its participants” (Concordia University, 2014). As a centre with a mandate that includes research, education and clinical practice, it is an exciting model of supporting adults with ASD and DD while engaging with the public through performance, exhibitions and multi-media initiatives. The proposed mosaic art project in some ways borrows from this multi-purpose and dual approach which is a form of action research.

Finally, the use of video and film to communicate what art therapists do is not new. As Judith Rubin and Barry Cohen, two renowned art therapists who have created an expressive arts therapy video production company have said, “We believe that film is the perfect way to convey the essence of therapeutic work using the arts. There are hardly any films demonstrating models
of good practice in creative arts therapies….we hope to bring the healing power of creative activity to many people around the world” (Expressive Media Inc. 2014). While the documentary video in this proposal is a small and humble in contrast, it is hoped that it will be a valuable contribution to the field.

Summary

Studio-based art making as proposed in the mosaic mural project supports the intention of creative self-expression, expanding skills through learning a new art media and engaging with peers, facilitators and eventually the broader community. Working in groups offers social, relational and communication opportunities while working within existing groups offers familiarity to reduce any anxiety over the new media and the new facilitator. The three smaller groups provide safety and comfort, yet allow for a larger number of people to be involved in creating the mosaic mural. Integrating community and family members into the art making process through community sessions will help build community and challenge experiences of isolation and marginalization that many adults with autism face. The public exhibition will increase community engagement and hopefully the participant’s sense of accomplishment and pride. The video will document the process as an educational and promotional tool for multiple audiences including the adult autism and disability communities, the art therapy and art communities, educators, potential funders, the general public.

Methodology

Research Methodology

A qualitative approach to research will be used in this project, which seeks to bring about positive change for individuals and for a larger community through the practice and promotion of art therapy. It is an “action-oriented” project exploring “real solutions to real problems” in a
context where best practices and art therapy research are currently scarce (Kapitan, 2010, p. 96). Data will be gathered through participant-observation, interviews, a brief questionnaire, and an invitation to engage in an arts-based response to the public event. These four methods address the various elements of the project, the different groups being engaged and the multiple sources for potential information. All will be valuable, yet participant-observation will be a critical and primary source of data. In her text on art therapy research Kapitan notes the dual role the art therapist/researcher plays - both participating in and observing the art therapy process (Kapitan, 2010). Kapitan reinforces the need for the researcher to be highly attuned to issues and dynamics of power and agency, to actions, behaviours, and feelings that may not be explicit and to be sensitive to the larger context that participants exist and function in. The cycles of “observing, experiencing and reflecting” are essential in participant-observation, and as Kapitan states, it is an approach that leads to action and takes an empowering stance towards participants as equals in the research process (2010, p. 96). This is so important with populations that have histories of exclusion or oppression. This project is a form of “action research” which is a valuable process for art therapists who seek to understand how to support a specific community or a population when empirical evidence or best-practices have not yet been established (Kapitan, L. 2010).

The mosaic art groups will involve participant-observation, followed by a post-project semi-structured interview with participants, one-on-one and in a small group (the art group). If a participant is unable to or chooses not to be involved in the interview, a family member, caregiver or support worker will be invited to an individual interview to give their impressions of how the project effected the participant. An interview will also be done with all staff, individual support workers and volunteers who are consistently present in the groups. Interviews will be semi-structured with specific questions, but also allow for informal or non-verbal responses and
input, particularly with the adults with autism (participants and volunteers).

For the public art opening and exhibition where the community will be invited to view the mosaic mural and the video, a brief questionnaire will be given to all who attend as well as an invitation to contribute to an art-based response piece. This event will also involve participant-observation of how the mosaic artists and community members interact or respond in this context. As much as possible the principal investigator will try to include the adults with autism into the research in a participatory way, for example inviting them to help design the public questionnaire and the art based response. Inviting feedback on the video after the initial screening is still being considered. It may be involve directly sending it out to targeted audiences with a brief questionnaire to return or exploring the idea of public feedback through the LM website where the video will be posted.

<table>
<thead>
<tr>
<th>Research Methodology and Procedures</th>
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<tbody>
<tr>
<td>Mosaic Art Groups (3)</td>
</tr>
<tr>
<td>Participant-Observation (individual &amp; group notes, reflection, log, video.) → Public Art Exhibition &amp; Video</td>
</tr>
<tr>
<td>Interviews - individual &amp; group with participants. → Participant-Observation.</td>
</tr>
<tr>
<td>Post-project individual interviews with staff, support workers, family or caregivers. → Video (feedback outside of exhibition)</td>
</tr>
<tr>
<td>Questionnaire for attendees at event. → Invitation to participate in an arts-based response to the project.</td>
</tr>
<tr>
<td>Explore option of feedback on website. → Send video to Expressive Media Inc. for possible distribution.</td>
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</table>

**Rationale for Methodology**

The decision to use a qualitative research approach with participant-observation as the primary source of gathering data, as well as semi-structured interviews, a questionnaire and an
art-based response activity is based on the community and group context of the project, the descriptive nature of the information being sought, the action and advocacy components of the project, and finally on the capacity of potential participants to engage in research a meaningful way. All participants will have a diagnosed developmental disorder that often results in barriers or challenges with verbal language and communication skills. Participant-observation recognizes these challenges and is a non-intrusive safe approach for vulnerable participants. However, it requires intensive observation, immediate and diligent note taking at the end of each session and engaging in triangulation of the data by interviewing staff and support workers, and family or caregivers to ascertain whether one’s observations have resonance with others (Kapitan, 2010). Inviting participants to engage in a small group and an individual interview demonstrates respect and gives a ‘voice’ to participants. It is a form of empowerment and models the goal of inclusion and engagement. The interview questions will be developed once the principal investigator knows the specific abilities and needs of the participants, however input through both verbal and visual means will be invited. Using these multiple methods for data collection reflects an inclusive, empowering and non-stigmatizing approach.

**Description of Procedures** (Major Project Activities)

**Participants.**

An invitation to participate will be extended to adults with ASD participating in two current art groups at the Paparella Art Program and to those who attend a weekly Spiritual social group. Staff will distribute the flyer and consent forms to individuals and their family or caregivers and gather the completed forms for the TATI student.
**Studio-based Group Art Therapy.**

The mosaic mural is similar to having one art directive that is worked on over several weeks. There are techniques to learn (designing a large collaborative art work, selecting shapes and sizes of tiles to fit an area, gluing and placing tiles, choosing colours, and so on). It is a slow methodical process. The mural will be made in sections by the three groups and then put together at the end to create a larger work allowing for both individual and collaborative work processes. There are four stages to creating a mosaic. See Appendix “C” for sample images of the steps:

1) Developing a theme and a design (drawing it on the board or surface)
2) Selecting and gluing tiles (some tiles will be cut, some will not need to be)
3) Grouting the mosaic artwork
4) Sealing the completed work

Where and how the final artwork will be installed are also important steps to be attended to.

A theme and a design will be developed with participants and facilitators in the first session. Some participants may want to contribute to this while others may feel more secure having the theme and design provided. Mosaic murals for indoors are commonly made on a base of plywood. The design will be drawn on the plywood and filled in with different colours and shapes of ceramic and glass tile over several weeks (See Appendix “C” for examples). There will be an option for each participant to work on their own piece of plywood 12” x 16” or to work with others on a larger piece of plywood 24” x 48” or both. Participants may shift from individual to group work within a session or from session to session. After all the tiles are glued onto the plywood, the grouting will take place. This is a fairly simple but messy procedure and it is expected there will be diverse responses to this process by participants depending on their sensory sensitivities. Facilitators will guide those who wish to try this process. Sealing the mosaic is a simple, quick process of painting a clear finish over the entire mosaic. The materials
used will be non-toxic and will be used following all safety procedures. The final mosaic mural will come together through connecting individual sections with sections that are created by more than one person. This flexibility is important and allows participants to shift their approach from one session to another depending on how they are feeling. The final size will be determined by the number of participants, yet it may be approximately 6 - 8 feet by 2 - 3 feet.

The TATI student will create and display a large visual poster illustrating mosaic processes and examples and will also communicate this information to participants verbally and experientially in each group. This form of ‘teaching’ mosaic techniques will be done throughout as needed, while strongly encouraging creative self-expression. The technical processes of fitting and gluing tiles will be tailored to each participants abilities while encouraging them to play and experiment. Most of the cutting or ‘breaking’ of tiles will be done by the TATI student outside of the group, but the option to try this will not be eliminated for those who want to. The existing art classes are 90 minutes in length however, staff report that the attention span of most participants on a single activity ranges from 15 - 45 minutes, yet it may increase or decrease with this project. To facilitate social inclusion and community engagement there will be two sessions, possibly on a weekend once the groups are established when family, friends or invited community members may join the participants in working on the mosaic mural. They may assist by cutting or sorting tiles, helping to fill in a background or working alongside a participant. This element will be further defined as the groups evolve in consultation with participants, family members and staff.

**Video.**

Airborne Video Productions will document the project in a video that will be 4 - 6 minutes in length. Airborne is a social enterprise of LM, which employs professionals “who happen to have ASD or a developmental disability” (Airborne Video Productions, 2014).
Videotaping will take place in the art studio during the mosaic art groups (not every group or every week). It will involve one person using a handheld camera or small tripod, with no extra lighting or disruptive equipment or processes. Absolutely no videotaping or photography will be done with any participant who has not given consent. A significant advantage to having Airborne shoot the video is that their studio is in the same location as the art studio, they hire individuals on the autism spectrum and they are familiar to many in the Lawson Ministries Autism Centre. They are sensitive to and knowledgeable about the population this project involves. The lead filmmaker of Airborne, the Program Director of Lawson Ministries, and the TATI student will meet to develop the video concept and logistics. It is hoped the video will capture the journey, the outcome, the accomplishments and the lessons that are always present in new initiatives.

**Public Exhibition.**

The procedure for the public exhibition will involve deciding with LM staff on a date for the public exhibition and opening celebration at the Freeway Coffee House, creating promotional material and distributing it to the general public and targeted audiences. The final mosaic mural will be weighed and measured for proper installation in the space by the TATI student, and installation will be done in collaboration with LM. The possibility of having it easily removed for display in other locations will be explored.

**TATI Human Subjects Policy**

Standard confidentiality statements such as in the Toronto Art Therapy Institute (TATI) consent forms are not applicable in all aspects of this project, for example for those who choose to be in the video. TATI’s *Adult with Legal Guardian Consent Form* has been adapted by the principal investigator to include consent for videotaping. Only those who give informed consent or for whom consent has been given by their legal guardian will be included in the video or
Apart from the video and photography consent, all personal information on all participants will be kept strictly confidential. Each participant will be informed of the option to terminate their participation in the group, the exhibition and the videotaping at any time (in the case of the video up until it’s final editing stage). In addition to the adapted TATI’s consent form, Lawson Ministries will use their own consent form for those who choose to participate in the videotaping. (The videotaping is being funded by LM, they will own the video and it will appear on their website. Every participant in the mosaic art project will be a client of Lawson Ministries and Lawson Ministries runs Airborne Video Productions).

Every participant will be informed of potential benefits and risks of participating in the project. The risks are minimal however a participant may find the mosaic tile materials or processes unpleasant or too difficult to work with, or they may find the collaboration process with others unpleasant or distressing, even though it will be gently introduced and both individual and collective art making will be offered and supported. In either of these cases, participants will be given the opportunity to have the materials or processes modified to their comfort level, or to withdraw from the project. The regular art class that is scheduled at the same time as the mosaic project will be taking place in another part of the art studio and participants will be welcome in that group should they choose to withdraw from the mosaic project. Every participant will have access to a support worker or a LM staff member during the group time and outside of the group should they need or want to access him or her for any reason related to, or as a result of participating in the group. The benefits of participating in the group include the potential to learn a new creative art form and new skills, the opportunity to communicate and socialize with a group of peers in a safe, familiar environment, and the opportunity to have their
artistic abilities and contributions recognized and validated by the broader community.

**Materials and Budget**

**Mosaic**
- Mosaic tiles – donated (already received from Olympic Tiles and Ciot Tiles)
- Thinset mortar and Wellbond glue – $40
- Individual wood panels (20) 8” x 10” @ $40, or one piece of plywood @ $40
- Plastic containers/bags for sorting tiles and colours – donated
- Plastic drop sheets or old bed sheets to protect surfaces – donated
- Putty knife & palette knife for spreading adhesive – donated
- Ballpeen hammers & rubber mallets for breaking tiles – donated
- Safety goggles (4) work gloves (4) – donated
- Mosaic “tile nippers” (2) – $40
- Miscellaneous – $40

**Total Budget: $160**

**Video**

The Salvation Army Lawson Ministries will cover the costs of producing the video.

**Exhibition**

The Freeway Coffee House, a social enterprise of Lawson Ministries will be the primary exhibition space. It is located in the building that houses the Paparella Innovative Art Program.

There will be no costs for the Mosaic Project to exhibit here.

**Promotional Material and Outreach**

Promotional materials and outreach for the public exhibition and video screening will be developed in collaboration with Lawson Ministries.

**Principal Investigator**
Coreen Gilligan - TATI Student, will be the principal investigator and lead facilitator for the *Creating in Community: A Mosaic Art Project With Adults Who Have Autism* project. Currently a student at TATI who has completed her course work and a range of art therapy practicum’s including at: BOOST Child Abuse Centre; Youthdale Crisis Unit; Syl Apps; Humewood House; Elizabeth Fry Association and the YWCA Breakthrough Programs. She brings over 20 years experience in community development work with marginalized and diverse populations, often using creative arts as a vehicle for addressing social issues and supporting individuals and groups. She has a BFA from OCADU in sculpture/installation and a Masters in Adult Education and Community Development from OISIE/UT.
References

Airborne Video Productions (2014) [http://www.airbornevideoproductions.com](http://www.airbornevideoproductions.com)

[http://www.airbornevideoproductions.com/?page_id=10](http://www.airbornevideoproductions.com/?page_id=10)


Autism Research Institute (2014), Autistic Global Initiative e-bulletin,


Centre for Addiction and Mental Health (2012) *Community Mosaic Project*  

Center for Disease Control and Prevention (2014) *Autism spectrum disorder: Facts about ASD*  

Concordia University (2014) *The Centre for the Arts in Human Development*  
Expressive Media Inc. (2014) *Art Therapy films and resources*

http://www.expressivemedia.org/index.html#


http://www.arttherapy.org/upload/autismtoolkit.pdf


Research report retrieved online:

Retrieved from


http://www.who.int/social_determinants/en/
## Appendix “A”

### Group Facilitation And Timelines

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<th>Mosaic Art Mural Groups</th>
<th>Group</th>
<th>Potential # in Group</th>
<th>Lead Facilitator</th>
<th>Co-Facilitator</th>
<th>Assistant/Volunteer</th>
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<td></td>
<td>Monday Morning</td>
<td>6</td>
<td>Coreen Gilligan TATI student</td>
<td>K. M. Staff Artist - LM</td>
<td>A.Y. McMaster SW Student</td>
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<td>Monday Afternoon</td>
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<td>Coreen Gilligan</td>
<td>K.M.</td>
<td>TBD</td>
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<td>Friday Morning</td>
<td>5</td>
<td>Coreen Gilligan</td>
<td>C. J. &amp; K.M. - LM</td>
<td>K.B. - LM staff Z - LM Volunteer</td>
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<td>LM - Lawson Ministries</td>
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<td>Note: Some participants will have an individual worker who will attend and assist.</td>
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<thead>
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<th>September - October 2014</th>
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<tr>
<td>Preparation</td>
<td>Mosaic Art Making In Studio</td>
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<th>February or March 2015</th>
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<tr>
<td>Mosaic Art Exhibition - Screening Video - Celebration</td>
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You are Invited

To Create a

Mosaic Art Mural

At Lawson Ministries
Paparella Innovative Art Studio

What is a Mosaic?
It is a picture made with small pieces of tile or ceramics. The pieces are glued onto a hard surface and joined together with grout. A mosaic mural is usually made by a group of people. You can work on it by yourself or with others. In the end it all comes together to make a whole picture.

Who can make a Mosaic?
Anybody! It’s not hard but takes time - you can work at your own pace and it can be a relaxing activity.

Who will lead the Mosaic Project?
An Art Therapy student, Coreen Gilligan will lead the project

During Monday morning & afternoon Art groups with Kamila & Friday mornings in the Spiritual Social group with Christine

How To Join the Mosaic Group:

Check this box □ Yes I want to join the mosaic group

Monday morning □ Monday afternoon □ Friday morning □

Print your name

Complete the Consent Form (p.2) and pass it in to Kamila or Christine

Note: The completed Mosaic Mural will be exhibited in the Freeway Coffee House and hopefully other locations as well. Lawson Ministries is having a video of the project made by Airborne Productions. Feel free to talk with staff at Lawson Ministries if you have any questions or concerns about this.
CREATING COMMUNITY: A MOSAIC ART PROJECT

Toronto Art Therapy Institute - Adult with Legal Guardian Consent Form

Name of Guardian (Please Print) ____________________________________________________________

The legal guardian of: ________________________________________________________________

Name of Adult (Please Print) ____________________________________________________________

By signing this consent form I agree that:

Name of client (Please Print) ____________________________________________________________

Can participate in art therapy sessions with the Salvation Army Lawson Ministries “Mosaic Art Group”

● I agree to the release of:

Photographs of (client’s name) _____________________________ Artwork □

Videotaping of (client’s name) _____________________________ in the Mosaic Art Group □

The Photographs and Video will be used by:

The Salvation Army Lawson Ministries for educational and promotional purposes, and by:

Coreen Gilligan Student at the Toronto Art Therapy Institute (TATI) for educational purposes that may include professional conferences or publications, and for the educational work of (TATI)

● I agree:

Legal Guardian

Print Name ____ Signature ____ Date ____________

Salvation Army Lawson Ministries Staff (Witness)

Print Name ____ Signature ____ Date ____________

TATI Student

Print Name ____ Signature ____ Date ____________

This consent is valid until ________________________________.

Toronto Art Therapy Institute - 8 Prince Arthur Ave., Toronto, ON M5R 1A9 - Tel: 416 924 6221
Appendix “C”