

# PAINING

# PRAISE FOR *PAINTING*

This is a book beautifully written for readers eager to learn more about health humanities. With a focus on creative practices and well-being, this book describes and explains the positive impact that painting can have on people's cognitive function, social interaction, emotional regulation and psychological well-being. For practitioners, this book offers valuable examples of painting workshops delivered in different contexts and with different populations. Overall, this is a must-read book for those interested in painting as an intervention for well-being.

**Professor Elvira Perez Vallejos**, School of Medicine and  
School of Computer Science, University of Nottingham, UK

This important text examines the significance of painting to human beings throughout history and at different developmental stages. Painting is framed via a psychological lens with contemporary examples shared, exploring its use in clinical and community settings. The chapter on working with undocumented migrants and refugees draws on the author's expertise in this realm and is particularly timely and important. The text is likely to be valuable for scholars and practitioners alike.

**Professor Victoria Tischler**, Faculty of Health and  
Medical Sciences, University of Surrey, UK

# ARTS FOR HEALTH

**Series Editor:** Paul Crawford, Professor of Health Humanities, University of Nottingham, UK

The *Arts for Health* series offers a ground-breaking set of books that guide the general public, carers and healthcare providers on how different arts can help people to stay healthy or improve their health and well-being.

Bringing together new information and resources underpinning the health humanities (that link health and social care disciplines with the arts and humanities), the books demonstrate the ways in which the arts offer people worldwide a kind of shadow health service – a non-clinical way to maintain or improve our health and well-being. The books are aimed at general readers along with interested arts practitioners seeking to explore the health benefits of their work, health and social care providers and clinicians wishing to learn about the application of the arts for health, educators in arts, health and social care and organisations, carers and individuals engaged in public health or generating healthier environments. These easy-to-read, engaging short books help readers to understand the evidence about the value of arts for health and offer guidelines, case studies and resources to make use of these non-clinical routes to a better life.

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# PAINTING

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United Kingdom – North America – Japan – India  
Malaysia – China

Emerald Publishing Limited  
Howard House, Wagon Lane, Bingley BD16 1WA, UK

First edition 2023

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**British Library Cataloguing in Publication Data**

A catalogue record for this book is available from the British Library

ISBN: 978-1-80455-355-8 (Print)

ISBN: 978-1-80455-352-7 (Online)

ISBN: 978-1-80455-354-1 (Epub)



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Certificate Number 1985  
ISO 14001

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ISO 14001:2004.



INVESTOR IN PEOPLE

We dedicate this book to all our students and participants in our workshops and interventions. Without their inspiration and encouragement this book would not have been possible.

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## SERIES PREFACE: CREATIVE PUBLIC HEALTH

The ‘Arts for Health’ series aims to provide key information on how different arts and humanities practices can support, or even transform, health and well-being. Each book introduces a particular creative activity or resource and outlines its place and value in society, the evidence for its use in advancing health and well-being, and cases of how this works. In addition, each book provides useful links and suggestions to readers for following-up on these quick reads. We can think of this series as a kind of shadow health service – encouraging the use of the arts and humanities alongside all the other resources on offer to keep us fit and well.

Creative practices in the arts and humanities offer a fantastic, non-medical, but medically relevant way to improve the health and well-being of individuals, families and communities. Intuitively, we know just how important creative activities are in maintaining or recovering our best possible lives. For example, imagine that we woke up tomorrow to find that all music, books or films had to be destroyed, learn that singing, dancing or theatre had been outlawed or that galleries, museums and theatres had to close permanently; or, indeed, that every street had posters warning citizens of severe punishment for taking photographs, drawing or writing. How would we feel? What would happen to our bodies and minds? How would we survive? Unfortunately, we have seen this kind of removal of creative activities from human society before and today many people remain terribly restricted in artistic expression and consumption.

I hope that this series adds a practical resource to the public. I hope people buy these little books as gifts for family and friends, or for hard-pressed healthcare professionals, to encourage them to revisit or to consider a creative path to living well. I hope that creative public health makes for a brighter future.

Professor Paul Crawford

## ACKNOWLEDGEMENTS

We would like to thank Professor Paul Crawford for the invitation to participate in this exciting collection. We are very grateful to the Gines Town Council for sharing the information and experiences of the art workshops. We would also like to thank Myriam Benítez and Marta Roiz for their help with the English translation, and Amanda Dal Cielo, Destiny Cerni, Sierra Edstrom, Lizzie Rielly and Ella Williamson for their help in revising the final translated version. Finally, we would also like to thank the entire Emerald editorial team, who facilitated the process.

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# INTRODUCTION

Let us begin by briefly describing three situations that are very distant from each other in time and space but that share the same action, painting or drawing. For the first scene, we will have to travel back in time more than 60,000 years, for example, to the Ardales cave in Andalusia (Spain). Imagine one of our relatives, perhaps a Neanderthal, although this fact is disputed, entering a cave on the edge of a hill. His aim was to colour stalagmites using his fingertips with an ochre-based pigment. According to some researchers, these ancestral pictorial practices confirm that these hominids already enjoyed symbolic intent. In the Ardales cave, it is possible to find more than a thousand less abstract pictorial motifs, for example, airbrushed hands in black pigment from around 30,000 years ago.

The second vignette takes us to Palermo, specifically to Palazzo Chiaramonte Steri, which was the seat of the Inquisition from 1600 until its abolition in 1782. About a decade ago, a large amount of graffiti painted by prisoners (including many women, whose time in this prison is documented in the archives of the Inquisition) could be found behind numerous layers of plaster on the walls of its cells. The graffiti and epigrams, a humble Sistine chapel of anguish, consist of prayers, resigned confessions, sarcastic or even angry messages by which the prisoners vented their sorrows. Today, the Chiaramonte palace, home to the University of Palermo, can be visited including the cells with the paintings.

Finally, we can imagine a child of about three or four years of age scribbling self-absorbedly on a blank piece of paper with a felt-tip pen. The shapes of his drawings are not interpretable, there is no obvious pattern, yet the child at intervals looks at the accompanying adult and sometimes points to the scribbles waiting for a response.

The adult congratulates him on his work, applauds him, asks if it is this or that and sometimes takes the felt-tip pen to draw easily identifiable objects as well. In this way, the adult and the child establish a strange and exciting dialogue around the paper and the shapes that are reproduced there.

These three scenes are very different. To begin with, the first is the product of the actions of one of our ancestors, tens of thousands of years back in time, which are difficult to interpret, but which allow us to affirm that these hominids were attracted to and interested in reproducing forms by means of pigments. In the second, in the modern age of our history, the paintings on the walls of the cells have a clear expressive, if not cathartic, character, by means of which the inmates tried to maintain a certain balance and contact with reality. In the last vignette, we simply observe the psychomotor activity of a child of a few years old, but, and this is very important, in an interactive context with an adult.

Despite all these differences, they also have something in common: they all revolve around an activity that has psychological and social repercussions of great relevance for human beings. We are referring to painting, the activity of printing shapes and colours on a material.

In this book, we deal with the question of the use of painting as a health tool. It is necessary to clarify that our concept of health does not strictly correspond to the biomedical one. That is, we do not understand health as the correct functioning of the physiological mechanisms that regulate our organism and the absence of symptoms. Closer to other approaches to health (Antonovsky, 1987; Engel, 1977; Saavedra, Arias-Sánchez, Bascón, & Cubero, 2021), we understand health as a complex state in which the person enjoys a meaningful place in the community where he or she lives and carries out valued activities that give meaning to his or her existence. Undoubtedly, the absence of pain and the enjoyment of adequate cognitive capacities are an essential part of this complex state, but they do not, or only in extreme cases, determine people's health. As Toombs (1988) states,

*Illness is experienced not so much as a specific breakdown in the mechanical functioning of the body's biology, but*

*primarily as a disruption of the self and a disintegration of the world. (p. 202)*

In Chapter 2, we will deal with some of these issues in a little more depth.

In this book, we will address some interventions related to health or well-being in non-clinical settings. In other words, even if we are working with people who have diagnoses such as schizophrenia, the context of intervention will not be healthcare, but community. As we will see, these community and social frameworks have in themselves a lot of potential when working with vulnerable groups. Most of these interventions could be included in the categories of 'health promotion' or 'secondary prevention' from a public health perspective. In this sense, we feel closer to artistic mediation than to psychotherapy. Although, logically, we recognise the value and functions of the latter. Artistic mediation is understood as a form of social intervention in which an artistic work becomes the mediator between the participants, their life experiences and institutional contexts. Through this mediation, which is always non-hierarchical, there are dialogues, new knowledge, changes of perspective, in short, new experiences that can be healing.

In Chapters 3, 4 and 5, we will describe three examples of interventions in socio-community contexts: popular painting workshops for children and elderly people in public social services, painting workshops as an emergency intervention for irregular migrants and creative workshops for people with severe mental disorders in a contemporary art museum.

Our proposal relates to the 'Health Humanities' tradition (Crawford, Brown, Baker, Tischler, & Abrams, 2015). This can be seen as a new approach to the training of professionals involved in health and social care that includes a deep understanding of human experience provided by the arts and humanities. Health Humanities places particular emphasis on the psychological health benefits of participation in creative activities by family carers, professional carers and users of health and social care services. At the same time, it makes an effort to empirically demonstrate the efficiency and effectiveness of these practices in improving the health of the population. In this sense, we will base our assertions on the scientific evidence.

Finally, the ‘Health Humanities’ strives to democratise ‘therapeutic’ interventions wherever possible beyond the specialised professions. Health is too important to be left to doctors and psychologists. And, in the same way, art should not be left to artists, but should be considered a right of all citizens.

# PSYCHOSOCIAL FOUNDATIONS OF PAINTING

In this first chapter, we will briefly review the psychosocial foundations of the practice of painting. It is not our intention to write an academic essay, although we will name some authors and their theories, but rather to construct a very personal and close account of the psychological and social aspects that we must always bear in mind when designing and carrying out a creative intervention based on painting in any social, health or educational settings.

In the ‘Perceiving: Bottom-Up or Top-Down?’ section, we will describe some of the perceptual processes that are involved in pictorial production and reception. Also, we will define what we understand by perception and explain in an accessible way how we relate to shapes, colours and textures. In this section, the contributions of Gestalt theorists, on the one hand, and some contributions of neuroscience with regard to vision, on the other hand, will take the centre stage.

In the ‘Development of Pictorial Skills’ section, we will deal with the development of artistic skills, especially painting, in an ontogenetic dimension. That is to say, we will essentially look at the changes that occur in children in the practice of painting as they grow up and what psychological processes underlie these changes.

In the ‘Painting as a Social Practice’ section, we will take a big step in the conceptualisation of painting skills. Understanding

painting as a social practice, we will analyse these in the framework of our interactions and in relation to the construction of our identity in the community. For this, we will use the contributions of the famous Russian psychologist Vygotsky. Finally, we will offer in a very synthetic way, as *bullet points*, what are the essential ideas that should be explicitly remembered from this chapter.

### PERCEIVING: BOTTOM-UP OR TOP-DOWN?

Empiricist philosophers claim that sensory perception is at the basis of the formation of our ideas and knowledge. After hundreds of thousands of years of evolution, humans have acquired complex sensory systems, including vision, which have enabled them to orient themselves effectively in the environment. The more than two hundred million retinal receptors in our eyes send information to our brains, enabling us to perceive the world and its changes clearly.

For the so-called direct perception theorists, all the information necessary for adaptive perception to occur without the intervention of higher cognitive processes are contained in the stimuli themselves. This is what has been called bottom-up perception. However, understanding and being able to predict the world requires more than complex retinal images. It requires understanding the structure of the world. Perception aims to cope with the complex and confusing variety of sensations that inundate us. To do this, we must identify particular instances and also form types of things, properties and functions. To give a simple example, we must identify two animals as being of the same species, even if the retinal image we have of them is very different because we see them from different perspectives. In other words, we must generalise, form categories and build concepts.

We will give an example of what we mean by briefly outlining the characteristics of semantic dementia, a fairly rare neuro-generative disorder. These patients have difficulties in identifying, naming and defining simple objects, called visual agnosia, while other functions such as episodic memory are preserved or not so impaired. Imagine a patient with this condition who is presented

with drawings of simple objects or animals, a cow, a car, a bed, etc., and asked to name them. This person will either be unable to do so or will use more familiar categories, for example, 'dog' to name the drawing of a cow.

When these cases are presented to our students, they always refer to sensory problems. However, these patients do not suffer from any problems in the retina or in the nerve pathways that transmit nerve impulses to the brain. In fact, a patient with this dementia would be able to copy the drawing of the cow accurately, depending on his or her pictorial skills, even if he or she claimed that the legs of that animal are the characteristics of a dog. Specifically, these patients suffer from the death of neurons in frontotemporal areas related to category formation, which severely impairs their semantic network. In contrast to the way a child gradually becomes more sophisticated in the categories with which he or she sees the world, these patients gradually lose the concepts with which we represent reality, first the more specific ones and then the more general ones. This and other strange neurological syndromes show us that the schemas and the conceptual systems with which we give names to the objects of the world influence our perception. In short, perception and the cognitive representation we have of the world through the concepts we construct cannot be separated from each other. As the Gestalt theorist Rudolf Arnheim (1954) rightly states in his classic work *Art and Visual Perception* 'seeing implies thinking' since perception, the construction of concepts and memory are indispensable for knowing the environment and surviving. According to this author:

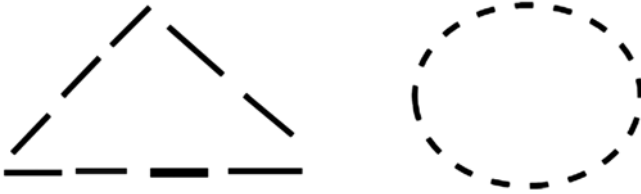
*Perception cannot be limited to what the eyes register of the external world. A perceptual act never occurs in isolation, it is only the most recent phase of a stream of innumerable similar acts, it has been carried out in the past and survives in memory. Similarly, the experiences of the present, stored and amalgamated with the product of the past, precondition the preconceptions of the future. Perception in the broadest sense must therefore include mental imagery and its relation to direct sensory observation.*

In conclusion, without denying the essential character of bottom-up processes, we must take into account higher (top-down) cognitive processes, such as memory, in order to understand perception correctly. The fact that our schemas (concepts and categories with which we order our perceptual experience in our mind) influence our perceptual processes does not mean that our sensations are a chaotic collection of experiences from the world. These concepts and categories are very elaborate products of perceptual contents, as we discussed in the beginning of this section. However, the Gestalt psychologists have made a clear view to us that sensory stimuli present a structure that is much more than the sum of isolated elements.

Visual perception is not chaotic. However, it is ordered in such a way that even in varying contexts and circumstances, it remains constant in a series of patterns. These are the so-called phenomena of perceptual constancy that allowed these theorists to postulate a series of well-known perceptual laws. One of the classical Gestalt theorists, Wertheimer (1938), compiled these general perceptual laws: the law of pregnancy and the law of figure and ground relationship. In addition, there are many more of a particular nature, such as the laws of continuation, proximity, symmetry, among others.

To briefly describe the first two, the law of pregnancy implies that we always tend to perceive the simplest forms. In the case of distortions or ambiguities, our mind adopts the best possible form. This general law is composed of several other particular laws, such as the law of similarity, which implies that isolated elements with a certain similarity tend to be considered as groups. The law of continuity predicts that a shape is better perceived when it is more continuous. If the pattern is broken, then the mind tends to continue it. Finally, the law of closure states that a shape is better perceived when it is the more closed. If a contour is not completely closed, the mind tends to close it, to name but a few. In [Fig. 1](#), even though the lines are fragmented, our perception makes us see geometric figures clearly and immediately. This phenomenon is called the law of closure.

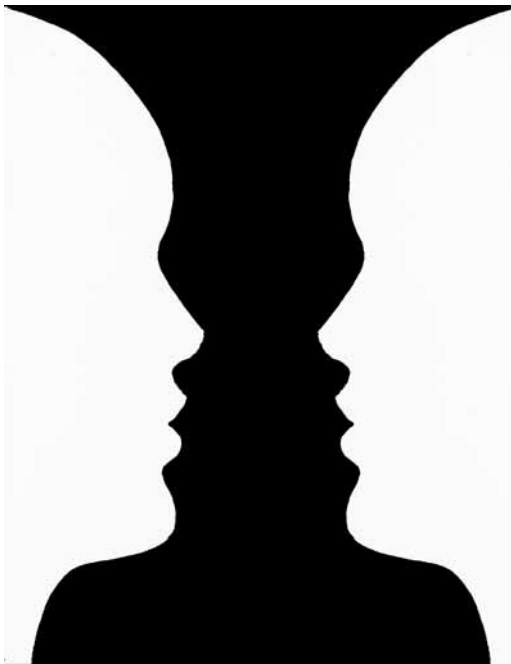
The law of figure and ground relationship states that in the perceptual process we always focus our attention on a particular object or group of objects (figure) in contrast to the rest of the



**Fig. 1. Law of Closure (Illustration of Own Creation by the Authors).**

objects that surround them (background). In any perceptual processes, there is always this dialectic between the objects or areas to which we pay attention and those that we do not. Thus, the perceptual experience will always depend on the dialectic between the figure and the background. As shown in [Fig. 2](#), our perceptual experience varies sharply depending on how we change the focus of attention.

All these considerations appear to be far from the aims of this book, but nothing could be furthered from the truth since, as



**Fig. 2. Identifying a Figure from the Background (Illustration of Own Creation by the Authors).**

Arnheim (1989) reminds us again, one of the main uses of art is 'to help the human mind to confront the complex image of the world'. Only if we are aware of all the implications of the perceptual processes, we can use painting as a tool for health.

#### DEVELOPMENT OF PICTORIAL SKILLS

The study of the development of pictorial skills is a very fruitful field. This is not surprising, since the analysis of this path, its ontogenetic evolution, is essential for understanding the psychological processes involved in pictorial creation. Moreover, understanding this development is essential to determine the objectives of the practice of painting when designing an intervention.

Logically, the development of pictorial practices in children will be parallel to the maturation of the nervous system, to the unfolding of their cognitive functions in interaction with the environment. To deal with this question, we must undoubtedly refer briefly to the contributions of Piaget and his genetic model (Piaget & Inhelder, 1972).

Piaget proposes a scheme of cognitive development in childhood that is not continuous, but goes through a series of stages, each with its own rules. Although Piaget has received some criticisms for understanding intelligence as a global phenomenon, it is worth reviewing it. In attempting to transfer Piaget's genetic model to the question of the ontogenesis of pictorial abilities, two aspects should be highlighted. The first is a fairly general trend in the development of these skills. That is to say, at least in childhood, we can observe common milestones in this development. The second aspect refers to the representational codes (formal elements used to represent objects) that occur at different stages of development, which seem to be very different from those of adulthood.

These two premises of the genetic model applied to the development of pictorial skills in childhood have led to theories that identify ontogenetic and phylogenetic development. That is to say, the same or similar stages that a child must go through to reach adult pictorial skills are the stages that the human species has had to go through throughout history. So the most evolved art, from a very naive Darwinian perspective, would be contemporary art. Among

other authors, Gardner (1982) has warned about these biases and has affirmed that both the art produced in the twentieth century and that developed in the Upper Paleolithic period are the products of an adult brain.

Piaget understands development as a process of adaptation of our organism to the environment. Just as the body, our cognitive system must adapt to the complexity of the world (new types of information, people, activities, etc.) with which it interacts. According to Piaget, human beings can achieve this essentially through what he called assimilation or adaptation. The former involves integrating the elements of the environment (objects) into one's own cognitive structure through action, which implies acting and transforming the objects according to the subject's cognitive structure. Accommodation is the parallel process of adjusting the cognitive structure to the conditions of the environment. Thus, intelligence or psychological processes, in general, would be understood as the biological adaptation of an organism such as the human being to the environment. Piaget's view moves away from both exclusively environmentalist and innatist's perspectives. The former emphasises essentially the environment or learning, as if there were no physiological or cognitive structure from which we relate to the world. The latter views genetic programming as sufficient to explain cognitive development, as if our interaction with the world plays no role in development. That is why Piaget's view is called constructivist, knowledge is an active process resulting from the interaction of subjects with the world.

In the following, we will briefly describe the developmental stages according to Piaget, while referring to the descriptions of specifically pictorial development provided by classical authors such as Luquet (1978) and Lonwenfeld (1947), who were no strangers to the works of the great Swiss scientist.

*Sensorimotor stage (0–2 years):* As the name suggests, in this stage, infants' actions on the world are reduced to perceptual (visual or auditory orientation) and motor skills, that is, reflexes. At this stage, children do not handle schemes, concepts or theories with which we organise or acquire information about the world and apply it to objects. The children learn their environment through their senses and actions. Cognitive evolution during this stage will

be determined by the laws of development of the nervous system. To give some examples, motor responses are perfected earlier in the parts closer to the central axis of the body than in those further away. A child will control the movement of its neck before it controls the movement of its fingers (proximal-distal law). Similarly, a child will control movements close to the head before those of the legs (cephalocaudal law).

This stage of cognitive development is closely linked to the 'scribbling' phase, proposed by many authors as the first of children's pictorial practices. This consists of the production of traces and stains without fine motor control and without planning. It is the simple proprioception of the movements, the pleasure of exploring the functioning of objects such as pencils and markers that the child sees his parents use, and the perception of the marks produced that motivate children to perform these actions. The sweeps and loops resulting from the first marks made on paper are directly related to the psychomotor development of the child and are typical of this phase. At the end of this stage, the child increases his or her control of movements and begins to make more stereotyped scribbles and, in Lowenfeld's words, 'the eye begins to guide the hand'. The child's attention increases and the way of grasping the objects with which he or she paints begins to resemble that of an adult.

*Pre-operational stage (2–7 years).* In this phase, children begin to construct internal models of the actions they perform. In other words, they begin to have cognitive schemas of automatic action patterns in their relationship with objects. We can consider this stage as the genesis of the internal representation of the world. At this stage, the symbolic function appears, still very precarious, through language, deferred imitation and symbolic play. Piaget divided this stage into two sub-stages. The first stage is preconceptual or prelogical (2–4 years) stage. Preconcepts are concrete sensorimotor schemes and are based on images that evoke characteristic specimens. This thinking is neither deductive, from the general to the particular, nor inductive, from the particular to the general, but transductive, that is, from the particular to the particular. For example, for a child, once the category 'dog' has been apprehended, all dogs would be the same.