



THE PROBLEM

Protecting the Public- The Michigan Association of Art Therapy (MAAT) was established in 1977, supporting a long preexisting community of art therapists in Michigan. The practice of art therapy is currently regulated in 20 US states, Canada, the UK, Australia, Israel, New Zealand and more, though it remains an unlicensed and undefined mental health field in Michigan. This poses a significant risk to the public as anyone can claim to be an art therapist, whether or now they have training in art therapy or any other mental health profession. Training in art therapy is equivalent to or exceeds that of other mental health fields, requiring a minimum of a master's degree post-graduate supervised work experience, and a rigorous board-certification exam before becoming fully licensed and credentialed. Yet, training programs are frequently offered that purport to provide adequate training to be an art therapist within as little as a one-hour via an online certificate program.

All licensed mental health fields in Michigan have established that the information exchanged during a session is protected by law as privileged communication. Other licensed mental health fields are also able to bill insurances for services while many art therapy programs are grant funded. This poses a threat to client confidentiality as art therapists and art therapy clients are pressured to display their artwork for fundraising activities with no legal protections to prevent this. No other mental health field pressures clients to publicly share what is revealed in a therapy session in order to fund services. Properly trained art therapists are well versed in the ethics and appropriateness of displaying client artwork while those without proper training put clients at risk.

As this field gains popularity, consumers see popular programs in the media that use creative means to treat mental health conditions for populations that have had difficulty getting effective treatment, such as the Creative Forces Program (<https://www.arts.gov/initiatives/creative-forces>) initiated by The US Department of Defense and Veterans Affairs that employs properly trained and credentialed art therapists to treat combat veterans with PTSD and TBI. Consumers then seek similar services not realizing that Michigan does not regulate art therapy as it does for other mental health services.

Meeting the Needs- Furthermore, the hundreds of properly trained art therapists in Michigan that have education and training that parallels licensed mental health providers are generally not eligible to fill critically needed mental health roles simply because art therapists are not licensed. This often leaves administrators frustrated, art therapists unemployed, and clients unserved. Art therapists increasingly are incurring the cost and burden of seeking a second master's degree in order to gain employment, often having to repeat coursework, duplicate internship hours, and take on more student debt. In response, some schools offered hybrid programs in counseling and art therapy, but even that strategy does not hold up in Michigan. In the case of VanderBand versus the Bureau of Professional Licensing the court denied a counseling license to VanderBand based on the title of her degree program, despite having met other criteria and the department having issued counseling licenses to VanderBand's colleagues who graduated in the cohort ahead of her. The court determined that since the school offered a counseling degree that specialized in art therapy as well as a standard counseling degree that the two are distinct professions. This leaves art therapists with few options to be gainfully employed if they remain in Michigan or do not take on significant debt for a second master's degree. It also leaves the field of art therapy with an unsustainable future in Michigan as it is becoming increasingly more difficult to obtain the supervised work experiences necessary to properly train art therapists.

There is an increased need for mental health services in Michigan and clients seeking mental health services are at times having to be put on wait lists for months, especially in rural areas where there are less resources. Even when there is a Registered Art Therapist (ATR) that has the credential of a Certified Alcohol and Other Drug Counselor (CADC) in Michigan they are limited in who they can serve. In some instances, depending on their insurance, an individual with any substance use disorder is unable to use their insurance to seek treatment with a clinician that has these credentials. Even though this clinician is specifically trained to treat this individual, they are often faced with finding another provider (that may not be specifically trained to treat substance use disorders) or paying out of pocket. Art therapy can be a useful approach and complement other interventions when treating substance use disorders but there are barriers that prevent people from getting much needed help. This is just one example of many that add to the struggles for people with various mental health conditions in Michigan. There is a lack of mental health resources for many people and it is becoming worse.

Michigan also ranks lowly in the ratio of students to school counselors and many administrators in schools are struggling to fill this gap. Some schools have reached out to MAAT seeking art therapists for after-school programming as they recognize the need for mental health interventions beyond the

scope of a typical after-school art program. Yet, when putting together a proposal, it is difficult to acquire funding and get administration approval to have an unregulated mental health clinician provide services for kids.

Michigan is home to one of the accredited and approved art therapy graduate programs at Wayne State University, as well as several undergraduate art therapy degree programs. Art therapists also train in other states and later return to Michigan to practice in the field. As more and more states license the field, art therapists are leaving the state in order to find gainful employment in a state that recognizes their training.

The Content of the Bill

- The proposed bill established a license for the practice of clinical art therapy in Michigan along with minimum standards for entry into the field that are comparable to those of other mental health fields already licensed. The standards are based on those set by the Art Therapy Credentials Board (ATCB), The American Art Therapy Association (AATA), and the Commission on Accreditation of Allied Health Professions (CAAHEP) as to allow reciprocity with other states with art therapy licensure.
- The bill acknowledges those who obtained their training and/or credentials throughout the more than 50 years the field has been in Michigan by establishing a grandparenting clause. The bill will provide a license to those who met standards at the time their degree or credentials were conferred for the first year after the bill is enacted.
- The bill establishes a limited license and criteria for those entering the field after graduation to allow them to obtain necessary supervised work experience for the ethical and competent practice of clinical art therapy.
- The bill establishes a license to provide art therapy supervision to trainees in the field along with minimum standards and criteria for obtaining the license. A grandparent clause is also included for the supervisor license as these criteria were recently upgraded by the national credentialing body, The Art Therapy Credentials Board (ATCB).
- The bill does not restrict the use of art in session by other mental health providers under the condition that they do not claim to be providing art therapy and that the use of art is within their professional training and scope of practice.
- The bill protects the titles and initials "Licensed Clinical Art Therapist," "LCAT," "Limited License Art Therapy Intern," "LLCAT," "Art Therapy Supervisor," and "ATS."
- The bill defines "practice of clinical art therapy" as providing or offering to provide art therapy and appraisal activities, as an independent or adjunctive therapist, to an individual, family, or group using the application of art

therapy principles and methods in the diagnosis, prevention, treatment, and amelioration of cognitive, developmental, emotional, and behavioral disabilities and conditions. Practice of clinical art therapy does not include the administration and interpretation of psychological tests except for those tests that are consistent with the individual's education and training and the professional code of ethics for credentialed art therapists.

- The bill defines "art therapy" as the integrated application of psychotherapeutic principles and methods with specialized training in visual art media, the neurobiological implications of art-making and the creative process, and art-based assessment models to assist individuals, families, or groups to improve cognitive and sensory-motor functions, increase self-awareness and self-esteem, cope with grief and traumatic experience, resolve conflicts and distress, and enhance social functioning. The term includes therapeutic interventions to facilitate alternative modes of receptive and expressive communication and evaluation and assessment to define and implement art-based treatment plans to address cognitive, behavioral, developmental, and emotional needs.
- The bill establishes privileged communication between the art therapist and the client, which includes the client's artwork unless proper written authorization and consent are obtained.

Fiscal Implications- The Department of Licensing and Regulatory Affairs reviewed HB 6098 in 2018 and determined that the fees established in the bill would adequately cover the cost of licensure and the licensing fee could be reduced after the first \$23,000 in application fees are collected. Otherwise, no significant financial implications were present.

Arguments For- This bill provides a solution to many of the issues faced by individuals seeking mental health services, art therapists, program administrators and the general public as they relate to art therapy. The bill protects the public by setting standards for entry into the field as well as establishing legal and ethical standards of practice. The bill establishes official recognition of the field for people like VanderBand, who were caught in a regulatory loophole. The bill allows Michigan to retain talent by providing a path for meaningful post-graduate work experience and gainful employment for art therapists. This bill will help to meet the under met demand for mental health services by adding qualified clinicians to the workforce as well as providing options to those struggling with unmet mental health needs. Art therapy has a unique ability to meet needs for those who struggle to verbally express their mental health needs. Art Therapists are uniquely trained in using art and art processes to help individuals, such as veterans with PTSD or TBI, elderly populations with Alzheimer's or Dementia, individuals with cognitive deficits, children who are still developing their

abilities to express thoughts and feelings, and more. The bill allows art therapists to gain a license whether they received training long ago, under standards that were on-par with related mental health fields at the time or whether they recently received training and are on-par with current standards in mental health. It defines art therapy and its scope of practice while allowing other providers to use art within their scope of training and ethical practice.

Arguments Against-

- In 2018 art therapists initiated HB 6098, which is substantially similar to the current proposed bill. LARA argued that the pool of candidates to create a board to oversee the license would be too small to choose from. Should an issue arise, it would be difficult to find individuals who do not already know each other in order to make a fair and ethical evaluation.
- **Response-** Since HB 6098 was rejected, the state has enacted licensing for both Acupuncturists and Midwifery, with active license counts in January of 2022 of 263 and 72 respectively. Furthermore, not licensing the field impedes growth of the field as art therapists cannot compete with their licensed mental health peers. As unregulated mental health clinicians, art therapists have difficulty gaining funding and administrative approval for art therapy programs. Art therapists also have difficulty competing in private practice with licensed mental health peers. Art therapists are unable to accept insurance to cover the cost of mental health treatment causing clients to seek services that are covered even though art therapy may be a better fit. Art therapists in private practice also have to compete with individuals with significantly inferior training, such as a one-hour online certificate program, who charge far less for their services as they have not had to incur the costs of a master's degree, supervision, credentialing, and continuing education. These factors create an unsustainable economic environment that encumbers growth in the field of art therapy. Without a license, the art therapists will not grow to the numbers of their licensed mental health peers.
- Prior to HB 6098, art therapists proposed legislation that would license the field under the board of Marriage and Family Therapy, in an anticipation of the state's concern for the relatively small number of art therapists. This legislation did not come to fruition as the statutes apparently specify that one profession may not regulate another. Many legislators have suggested that art therapists team up with music therapists or other creative arts therapists in order to increase numbers.
- **Response -** While this may seem to solve the problem, the standards for becoming an art therapist are vastly different than those set for a music therapist. Art therapists have the most overlap in education and

training requirements with counselors, with some programs actually meeting all standards exactly with the exception of the degree title. Music therapists require only a bachelor's degree for entry into the field so the overlap in graduate level training and post-graduate work experience does not exist. If counselors or marriage and family therapists are not able to oversee an art therapy license, then it stands to reason that art therapists and music therapists would not be able to effectively share a licensing board.

- Mental health providers in related fields have raised concerns that this bill would limit their ability to use art with their clients.
- **Response-** The bill provides protection to the public by holding accountable any licensed professional using art and art processes to assess or treat mental health clients. This includes protections for the artwork created in therapy by deeming it as privileged communication. Art therapists are skillful, purposeful and ethical in their use of art and art processes to assess and treat mental health conditions. This includes, but is not limited to, receiving training in projective assessments and techniques, developmental and psychological appropriateness of artwork, art materials, and art processes, adaptations and considerations for special populations, art therapy research, and ethical considerations for artwork created in session and publicly displaying artwork, and more. Art therapists also recognize the overlap in training between many mental health fields, including overlaps involving the use of art in therapy. This bill specifies that other licensed professionals are able to use art in their professional practice to treat patients so long as they are doing so within the scope of their training and ethical standards of practice and as long as the therapy is not presented as "art therapy" nor the clinician represented as an "art therapist."