



LEWIS & CLARK COLLEGE
GRADUATE SCHOOL OF EDUCATION AND COUNSELING
AT 570 ART THERAPY CANDIDACY/PORTFOLIO
(1 Credit)
SPRING, 2019

When: Thursdays 9 am - 11 am: 1/10, 1/24, 2/7, 2/21, 3/7, 3/21, 4/4, 4/11 or 4/18

Where: TBD

Instructor: Mary Andrus DAT, ATR-BC, ATCS, LPC

Office hours: Wednesdays, 10am to 11:30 am

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CATALOG DESCRIPTION: Comprehensive evaluation of the student's level of clinical understanding of theory and art therapy practice in preparation for internship placement. This is a required course for all art therapy students moving into their third year of the program.

COURSE DESCRIPTION

This course evaluates the student's learning and understanding of the program coursework along with their readiness for Internship advancement. Students will be evaluated on their knowledge and application of art therapy assessments, treatment planning, goal setting and ability to present a comprehensive understanding of the application of art therapy to individuals and groups.

CAAHEP STUDENT LEARNING OUTCOMES (SLO)

SLO-A -	Understand the historical development of Art Therapy as a profession, and how Art Therapy theories and techniques are a foundation for contemporary Art Therapy professional practice.
SLO-B -	Distinguishing among the therapeutic benefits of a variety of art processes and media, strategies and interventions, and their applicability to the treatment process for individuals, groups, and families.
SLO-C -	Recognize that Art Therapy, from a multicultural perspective, takes into consideration the specific values, beliefs, and actions influenced by a client's race, ethnicity, nationality, gender, religion, socioeconomic status, political views, sexual orientation, geographic region, physical capacity or disability, and historical or current experiences within the dominant culture.
SLO-D -	Select culturally and developmentally appropriate assessment and evaluation methods and administer and interpret results to identify challenges, strengths, resilience, and resources for Art Therapy treatment planning.

SLO-H-	Recognize clients' use of imagery, creativity, symbolism, and metaphor as a valuable means for communicating challenges and strengths and support clients' use of art-making for promoting growth and well-being.
SLO-J-	Apply principles of human development, artistic and creative development, human sexuality, gender identity development, family life cycle, and psychopathology, to the assessment and treatment of clients.
SLO-M-	Pursue professional development through supervision, accessing current Art Therapy literature, research, best practices, and continuing educational activities to inform clinical practice.

CAAHEP CONTENT AREAS

Content Area	Description	Mastery Level	Assessment
d.A.2	Recognize the need for awareness of and sensitivity to cultural elements which may impact a client's participation, choice of materials and creation of imagery	Reinforce	Written Assessment, Video, and Oral Presentation
h.S.2	Integrate contextual/ ecological factors bearing on human development such as cultural identities, spiritual, systemic within and outside family nucleus, physical, neurological, biological, and physiological	Reinforce	Written Assessment and Oral Presentation
i.A.1	Recognize and display a professional commitment to Art Therapist characteristics that promote the therapeutic process	Reinforce	Candidacy Readiness Self Evaluation
i.K.1	Identify evidence-based strategies and clinically-grounded approaches for assessment and treatment	Reinforce	Written Assessment, Video, and Oral Presentation

COURSE OBJECTIVES

Upon completing this course, students will be able to demonstrate:

1. Understanding of ethical principles of art therapy
2. How graphic development informs treatment planning
3. The ability to therapeutically engage clients
4. The ability to write a comprehensive art therapy assessment and treatment plan
5. The ability to self-evaluate understanding and engagement of art therapy

REQUIRED TEXTS & READINGS:

Since AT 570 is an evaluation of student's readiness for Internship advancement, no text will be required. Students will, however, be expected to reference the following materials:

Reference Texts:

American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders (5th edition). Washington, DC: Author.

Gussak, G. & Rosal, M. (Eds.) (2016), *Wiley Handbook of Art Therapy* (1st Edition). Malden MA: Wiley Blackwell.

Lukas, S. (1993). Where to start and what to ask. New York: W.W. Norton.

Reference Articles:

Gantt, L. (2001). The formal elements art therapy scale: A measurement system for global variables in art. *Art Therapy, 18* (1) 50-55.

Gerber, N. (1998). A developmental approach to assessment in adult art psychotherapy. *The Arts in Psychotherapy, 7*, 105 -112.

Hinz, L. D. (2015). Expressive Therapies Continuum: Use and Value Demonstrated With Case Study (Le continuum des thérapies par l'expression: étude de cas démontrant leur utilité et valeur). *Canadian Art Therapy Association Journal, 28*(1-2), 43-50.

NONDISCRIMINATION

Lewis & Clark College adheres to a nondiscriminatory policy with respect to employment, enrollment, and program. Lewis & Clark does not discriminate on the basis of actual or perceived race, color, sex, religion, age, marital status, national origin, the presence of any physical or sensory disability, veteran status, sexual orientation, gender identity, or gender expression and has a firm commitment to promote the letter and spirit of all equal opportunity and civil rights laws, including Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, Title VII of the Civil Rights Act of 1964, the Age Discrimination Act, the Americans with Disabilities Act of 1990, and their implementing regulations.

DISABILITY SERVICES STATEMENT

If you have a disability that may impact your academic performance, you may request accommodations by submitting documentation to the Student Support Services Office in the Albany Quadrangle (503-768-7192). After you have submitted documentation and filled out paperwork there for the current semester requesting accommodations, staff in that office will notify me of the accommodations for which you are eligible.

TEACHING METHODS

As an evaluation of the students' learning and understanding of program coursework and readiness to advance into internship, class discussions and experiential activities will be utilized however independent initiative is a core aspect of the course.

CPSY DEPARTMENTAL ATTENDANCE POLICY

Class attendance is expected and required. Any missed class time will be made up by completing extra assignments designed by the instructor. Missing more than ten percent of class time may result in failure to complete the class. This would be 4.5 hours of a 45 hour class (3 credits), 3.0 hours for a 30 hour class (2 credits) or 1.5 hours for a 15 hour class (1 credit.) In case of extreme hardship and also at the discretion of the instructor, a grade of incomplete may be given for an assignment or the entire course. In such cases, the work to

be submitted in order to remove the incomplete must be documented appropriately and stated deadlines met. Students are expected to be on time to class and tardiness may be seen as an absence that requires make-up work.

DISCLOSURE OF PERSONAL INFORMATION

Each student should decide for him/herself what information to disclose. Students are advised to be prudent when making self-disclosures. The program cannot guarantee confidentiality of student disclosures given the group environment, although personal comments should be considered private and confidential – and remain only in the classroom – unless an exception to confidentiality applies.

CELL PHONES

Cell phones must be silenced and text messaging is not allowed during class time. If there is an emergency you may exit the class to use your cell.

CLASS PREPARATION

Students must attend all classes and complete assignments, test, and evaluation in order to advance into their final year of the art therapy program.

ASSIGNMENTS AND COURSE REQUIREMENTS

Assignment	Point Value
Comprehensive Written Assessment	30
Oral Presentation of Assessment	30
Video of Group Facilitation	10
Video Self-Reflection Paper and Art Piece	10
Candidacy Self-Evaluation	10
Candidacy Self-Reflection Paper and Art Piece	10
Total Points in the Course:	100

EVALUATION AND GRADING

A = 94-100%	B = 83-87%	C = 73-77%
A- = 90-93%	B- = 80-82%	C- = 70-72%
B+ = 88-89%	C+ = 78-79%	

NOTE: All assignments must be turned in on the day they are due. Five percent will be deducted for each day an assignment is late.

ASSIGNMENTS AND EVALUATION

Comprehensive Assessment

You will prepare and submit for review a thorough assessment of a client that the student is working with in their practicum site. The written and oral components will evaluate the your ability to synthesize the following: 1) Gathering of Pertinent Client Information 2) Art Findings and Analysis 3) Domains of Functioning 4) Summary of Findings 5) Treatment Approach and Rationale 6) Risk and Protective Factors 7) Treatment Goals 8) Directives and Materials 9) Summary of Findings.

You will not be asked to arrive at a DSM V or ICD 10 diagnosis. Plan to have the client complete 5-7 pieces of artwork. Images are to be attached in digital format. Disguise identifying information of client, which includes the name of the site. Artwork images need to be well documented for the reader. Identify client's risk and protective factors along with their treatment needs. State your treatment goals as an art therapist working with this client. Relate goals to one or more identified treatment needs.

You must relate goals to treatment interventions that would be appropriate for the client during the next three consecutive sessions. You will indicate duration of the sessions and whether they are individual, family or group. It should be assumed these sessions are consecutive and immediately follow the first meeting(s) in which the client produced the art you are presenting in this case. Student needs to explain their reasoning for the inferences and clinical decisions based on their understanding of theories.

Written Assessment (30 points)

The body of the paper is not to exceed 20 pages (this does not include title page or references). Papers are expected to demonstrate skillful writing as well as appropriate use of credible, relevant sources to develop ideas that are consistent with the literature and are formatted to APA standards. Papers must include all categories listed in the following rubric.

Written Assessment Rubric

Elements	Not Met 0	Emerging 1	Acceptable 2	Proficient 3
Gathering of Pertinent Client Information	No attempt; No mention of any efforts at seeking additional historical or environmental factors	Some relevant data relate to historical and environmental factors are referenced, but inadequately explored.	Most relevant observable historical and environmental factors are sought out and integrated into an understanding of their impact on the client's functioning.	All relevant observable aspects of historical and environmental factors are explained with depth; Inferences about functioning are accurate and applicable to case.
Art Findings	No attempt; only a few elements of the	Some aspects of the visual language are	Most aspects of the visual language are	All components of an art finding and art

and Analysis	visual language are described; irrelevant observations are included; no observable aspects of the art process are included; no attempt at assessing level of graphic development.	described; irrelevant aspects of the visual language are described; few observable aspects of the art process are included; Mood/impression are not included; graphic development is assessed inaccurately.	described and are relevant to the individual; most observable aspects of the art process are included; mood/impression are included; graphic development is accurately assessed.	analysis are identified and integrated in a coherent, cohesive, and concise manner, and free of errors.
Domains of Functioning	No attempt; Assessment art is not referenced; verbalizations are not mentioned; behaviors are minimally or not described; no statement about functioning.	Some aspects of the assessment art are integrated but not in a relevant manner; verbalizations noted are not relevant or partially relevant; behaviors are described and are partially relevant; statement about functioning is vague or inaccurate	Relevant observable aspects of the assessment art products and process are referenced; relevant verbalizations are noted; relevant behaviors are described; none of these are well integrated; statement about functioning in domains is vague.	Relevant artworks, processes, verbalizations and behaviors are described and integrated together. A clear statement of the client's functioning is made in all areas of functioning.
Summary of Findings	No attempt; irrelevant observable aspects of art making process are described and are not related to other elements of the assessment. Mostly used historical info. Content indicators are missing and lacking detail.	Some observable aspects of art making process are described; other elements are not referenced or are irrelevant. Over reliance on historical info. Content indicators are mentioned but unclear and not linked.	Most observable aspects of the art making process are included and other elements are referenced; only minor inaccuracies present. Historical info referenced in a relevant manner. Content indicators are acknowledged, attempt at describing pattern and structure.	All relevant observable aspects of the art making process are described and other aspects are referenced in an accurate manner with no errors. Historical info referenced in a relevant manner. Well described content, pattern and structure in work.
Treatment Approach and Rationale	No attempt Distorted or inaccurate theoretical basis identified Complete absence of understanding of how theory informs the selection of	Accurate identification of theoretical basis but limited understanding of how theory informs the selection of assessment methods, treatment approaches and case formulation. Attempts to	Highly accurate identification of the theoretical basis and a developed understanding of how theory informs selection of assessment methods, treatment	Highly accurate identification of all the key theoretical components and a deep understanding of how theory informs the selection of assessment methods,

	<p>assessment methods, treatment approaches, and case formulation. Absence of any reference to key theoretical components and how this provides the basis for interpretation of art findings</p> <p>No attempt; Rationale provided are unrelated to treatment methods and theory used is irrelevant. Media choices are inappropriate.</p>	<p>identify a key theoretical component but is not able to show how this component supports interpretation of art findings</p> <p>Rationale is loosely related to methods; theory is loosely related to rationale. Media choices are related to the assessment.</p>	<p>approaches and case formulation Able to identify several key theoretical components which superficially support the interpretation of art findings.</p> <p>Rationale is mostly related to the methods ,theory is generally supportive of the rationale. Media choices are in</p>	<p>treatment approaches, and case formulation. Able to identify all key theoretical components which substantially support the art findings</p> <p>Rationale provides complete support for treatment methods; theory is fully supportive of rationale and used very specifically. Media choices are line supported. Media choices are</p>
Strengths/ Limitations Risk/ Protective Factors	<p>No attempt; strengths /limitations listed are not related to information from assessment findings or supporting materials; no risk/protective factors identified</p>	<p>Strengths/ limitations are vaguely related to information from assessment findings or supporting materials; may not be client-centered; limited risk/protective factors identified.</p>	<p>Strengths/ limitations are related to information from assessment findings; are stated as client centered; risk/ protective factors are included; may be some minor lack of clarity.</p>	<p>Strengths/ limitations are directly related to information from assessment findings; are stated as client centered and are clear statements of what the client is capable of; comprehensive identification of risk/protective factors.</p>
Treatment Goals - Long Term and Short Term	<p>No attempt; Goals do not address deficit, symptom, or behavior; not measurable (if required); does not relate to the prioritized list of problems.</p>	<p>Deficit, symptom, or behavior to be addressed is vague or unrelated to assessment findings; not measurable; partially related to prioritized problem list.</p>	<p>Deficit, symptom, or behavior to be addressed is clearly stated and related to assessment findings; goal is partially measurable, goals relate to prioritized problem list.</p>	<p>Deficit, symptom, or behavior to be addressed is clearly stated and related to assessment findings; goals are measurable; goals directly address prioritized problem list.</p>
Directives and Materials	<p>No attempt; Art therapy directives do not utilize observations from assessment; media/materials and processes do not</p>	<p>Limited observations from assessment are used in the design of art therapy directives; art therapy directives are loosely related to goals; partially appropriate for</p>	<p>Multiple observations from assessment inform the design of art therapy directives; art therapy directives are sufficiently related to goals and are</p>	<p>Comprehensive observations from assessment directly inform the design of art therapy directives; art therapy directives are directly related to</p>

	match with treatment goals or client's developmental level.	client's developmental level.	developmentally appropriate.	goals and are developmentally appropriate.
Summary of Findings	Summary is lacking information or missing.	Summary demonstrates an attempt to collate key findings, overall summary is not capturing big picture.	Most relevant aspects of case is noted. Attempts at succinctly highlighting key points from case and coursework.	Excellent summary linking theoretical contributions from coursework/ readings to findings in the assessment, treatment plan and methodology
APA Style and Format	Does not integrate sources or sources are inappropriate to the content. Inconsistent, or inappropriate citations, sometimes entirely absent. Citations do not match references.	Demonstrates an attempt to use sources to support ideas. Quality of sources and usage is inconsistent. Consistent errors in citation or reference format.	Demonstrates use of credible, relevant sources to support ideas that are situated within the discipline and genre of the writing. Format of citations and references generally consistent with APA standards.	Demonstrates skillful use of credible, relevant sources to develop ideas that are appropriate for the discipline and genre of the writing. Meticulous citations and references,format adheres consistently to APA standards.

Oral Presentation (30 points)

You are expected to create a professional 20 minute presentation which covers the above sections in a manner that demonstrates your aptitude and readiness to advance to candidacy within the program. Attention should be paid to the quality of the artwork photos to ensure clear representation of the graphic components. You will be evaluated on your 1) Overall Organization 2) Preparedness 3) Visual Elements 4) Clinical Content 5) Professional Delivery 6) Effective Use of Time

Oral Presentation Rubric

Elements	Not Met 0	Met 3	Proficient 5
Overall Organization	No logical flow, none or poor introduction, no discernable organization.	Some parts of the presentation are out of order, overall, logical sequence.	Exceptionally well organized, no missing part, easy to follow.
Preparedness	Out of date or misinformation, does not explain the critical information.	Grasp of important concepts, overall understanding of theories, some topics not well understood or presented.	All fundamentals and details are fully integrated and understood.
Visual Aids	Minimal inclusion of visual	Overall high quality of visual	Creative and dynamic

Quality and Effect	aids.	aids.	use of visual aids. High quality photos.
Clinical Content	Main topics, supporting information, and/or clinical reasoning are not present or poorly explained.	Most of the main topics, supporting information, and clinical reasoning are present or clearly explained.	Thorough integration of main topics, supporting information, and clinical reasoning
Professional Delivery	Minimal engagement with audience, poor eye contact, monotone voice, long pauses, does not speak clearly.	Overall, maintains posture, eye contact, voice clarity and interest. Professional attire.	Strong presence, clearly communicates, engages audience, professional attire,
Effective Use of Time	Ran over time allotment, became distracted, and did not provide time for audience engagement.	Sufficient time for each topic and provided enough time for audience engagement.	Clearly covered all topic areas, no distractions with time for audience engagement.

Video of Group Facilitation (10 points): Each student will prepare a 30 minute video of themselves conducting a group at their practicum site. The video will demonstrate the student's ability to engage clients in art making.

Video Self-Reflection Paper and Artwork (10 points): Each student will assess themselves as a group facilitator. This includes creating an art piece and writing a 2 page paper about your strengths and areas of growth as it pertains to your facilitation skills with this specific group. You will choose a 5 minute section that they will share in class.

Candidacy Self-Evaluation (10 points): You will complete the Advancement to Candidacy self-evaluation (see program handbook) as it relates to your Practicum placement and advancement to candidacy.

Candidacy Self-Reflection Paper and Artwork (10 points): You will write a 2-page self-reflection paper and create an art piece about your readiness as a means of demonstrating your ability to reflect on your level of proficiency in the program thus far and specific areas in which you hope to grow as an art therapy student going into clinical practice.

COURSE SCHEDULE

Class Date	Topic	Assignments Due
Week 1, 1/10	Class Overview, Defining Candidacy Expectations, Art Finding Process and Dialogue	Art findings from case study Huckvale, K., & Learmonth, M. (2009). A case example of art therapy in relation to dialectical behavior therapy. <i>International</i>

		<i>Journal of Art Therapy, 14(2), 52-63.</i>
Week 2, 1/24	Integrating art therapy language in written and oral communication	Case study domains of functioning and Treatment Plan Goals
Week 3, 2/7	Peer Reviews, sign up for video sharing (choose a 10 minute section)	Draft of Comprehensive assessment due for peer review
Week 4, 2/21	Video Reflection and Insight	
Week 5, 3/7	Video Reflection and Insight	Video and Reflection Paper due
Week 6, 3/21	Professional Acumen, Panel Review Expectations, Sign up for Oral Presentation	Written Assessment due
Week 7, 4/4	Prepping for oral presentations	Candidacy Self-Evaluation due to include Self-Reflection Paper and Art Piece
Week 8, 4/11 or 4/18	Final: Oral Presentations	Oral Presentations: In this final class each student will present a final presentation to 2 faculty. Students from other section are encouraged to attend and observe presentations from students in opposite section.