A Message from the ATCB President

Welcome to the Summer Edition of the ATCB Review. This is the first hard copy of the Summer ATCB Review since the Review went electronic. The ATCB switched the timing of our hard copy edition from Fall to Summer in order for our credential holders to receive the Review before the AATA Conference, and so that we could have hard copies available at the ATCB booth in the Exhibit Hall. Feel free to pick up an extra copy and share it with your employers and friends.

The ATCB held its Spring Board Meeting April 15 – 16th. President-elect Penny Orr and the Strategic Planning Committee conducted a full half-day Strategic Planning Session on April 14th. During that meeting, the Board started work on a new 3-year plan that will go into effect on January 1, 2012. There are many exciting new things going on in the field of art therapy and with the ATCB. In this Review, several Board Members have written articles in which they share their expertise and focus on current trends effecting the art therapy profession, and also provide updates regarding ongoing projects and deadlines.

President-elect Penny Orr has written another outstanding and timely article which focuses on the ethics of social media and confidentiality. Throughout the article, Penny points out ways to avoid possible pitfalls in protecting the privacy of clients when using electronic formats. She identifies sections of the ATCB Code of Professional Practice and then expounds on their meaning, giving examples of how art therapists can protect their clients and themselves from misuse of electronic media. She encourages art therapists to seek out various professionals to assist in securing the most confidentially safe means of electronic communication. This information is vital to all our practices and becomes even more important when communicating with clients, professionals or the public through electronic means. I know that as an art therapy professional, you will find this information helpful.

The Frequently Asked Questions (FAQ) About the Exam section of this newsletter focuses on the process involved when an art therapist takes the ATCBE (exam) for state licensure and then wants to become a nationally board (continued on page 2)
President’s Message (continued from cover)
certified art therapist with the ATCB. Director Libby Schmanke has written a very informative article answering the questions often asked regarding the ATCBE. We hope that this information will assist art therapists who have taken, or are taking, the ATCBE and wish to become board certified.

September is right around the corner. And September is the filing date for the ATCB to complete its application with the National Commission for Certifying Agencies (NCCA) for accreditation of the board certification credentials – ATR-BC. Bill More, Chair of the NCCA Ad Hoc Committee, gives an update on the progress made toward this application in his article on page 2. The Ad Hoc Committee—in conjunction with the entire Board of Directors—continues to work diligently towards completing all the preparations necessary for the September filing. The ATCB looks forward not only to filing the application with NCCA, but towards receiving accreditation from NCCA for the ATR-BC credential. Undoubtedly, this recognition will benefit all ATR-BCs and protect the right to practice in the future.

Carol Olson, ATR-BC, is featured in the Credential Holder Profile. Carol shares with us her art therapy history and passionately comments on the value of her ATR-BC credentials. We thank Carol for allowing us to profile her work and art therapy journey. It is our hope that art therapists will become more familiar with each other through this section of the Review. If you would like to submit your professional profile or know of someone you wish to recommend, please contact Editor Mary Ellen McAlevey through the ATCB National Office.

Recently, a representative of the United States Department of Labor (USDOL) O*NET division contacted both the ATCB and AATA to assist in the development of art therapy as a standalone professional category. In an e-mail, O*NET states that the ATCB is recognized as the premier credentialing body for art therapy practitioners with the mission “to protect the public by promoting the competent and ethical practice of art therapy.” The ATCB is very excited about this news and plans to assist O*NET in every way possible. We view working with O*NET as a long awaited opportunity for the art therapy profession. Please refer to the article on page 5 for more details. We will keep you informed through our Web site and e-blasts on ways that you can help in this effort.

I look forward to seeing you at the AATA conference in July. Please visit the ATCB booth in the Exhibit Hall for your credential holder or future credential holder ribbon and ATCB gift. Best wishes,
Deborah Good, PhD, ATR-BC, ATCB President

NCCA Accreditation Update
Bill More, ATR-BC, Chair

ATCB Ad Hoc Committee on NCCA Accreditation

All ATCB credential holders, with the possible exception of those new to the Review, are aware by now that ATCB is seeking accreditation of the ATCB board certification process by the National Commission for Certifying Agencies (NCCA). Accreditation will assure the public and stakeholders, including employers, clients, and state licensing boards that an art therapist’s professional competence has been assessed through an examination and a certification process that meet national standards. Accreditation will also ensure that board certified art therapists will be qualified for federal government jobs if and when the Institute for Credentialing Excellence (ICE) is successful is its efforts to make having an NCCA accredited certification a requirement for holding any federal job that requires a certification.

We are now in the final stage of the multi-year process that has led to preparation of an application for the September 2011 filing date. The first step in this final stage will be taken in June when President Deborah Good files a letter informing NCCA of our intent to apply for accreditation of the ATR-BC. ATCB will again be contracting with our partners at CCE to complete the application process, including provision of cross-referenced exhibits that show ATCB’s compliance with the 20 NCCA standards for accreditation. I met with Shawn O’Brien of CCE and ATCB Executive Director, Rita Maloy, just prior to the Spring Board Meeting (continued on page 9)
Applying Ethics to the Age of Social Media: Confidentiality

Penny Orr, PhD, ATR-BC, ATCS
President-Elect

Anytime confidential information is put into an electronic format, such as case notes or digital photographs, a therapist immediately needs to address the issues of privacy, confidentiality, and consent. As we all know, if we send an e-mail message about a client or post a picture of client work to a Web site or our Facebook page, the absence of prior patient consent would be a breach of confidentiality. The ATCB Code of Professional Practice addresses confidentiality issues in the following clauses:

3.2.3 Art therapists shall use clinical materials in teaching, writing, electronic formats and public presentations only if a written authorization has been previously obtained from the client or the legal guardian.
3.2.4 Art therapists shall obtain written, informed consent from a client or, when appropriate, the client’s parent or legal guardian, before displaying the client’s art in galleries, healthcare facilities, schools, the Internet or other public places.

But keeping client information confidential when that information is in an electronic format goes beyond simply gaining client consent prior to making it public. An issue that makes putting confidential information in electronic format different from having that information in a hard copy format, is that electronic information is very difficult to permanently destroy on a hard drive or the Internet, but very easily accessed or destroyed in other formats. The risks for electronic data can be internal, external, and random, and can result in data damage, falsification, loss, or leakage.

Even before you put electronic client information or an image online or send it by e-mail, it is at risk. Fire, flood, lightning, virus, untrained staff, and inappropriate people having access, can put the confidentiality and stability of this information at risk. It is important that all confidential information stored locally be backed up in a secure manner, and that only people who have a right to access that information can get to it on your computer. It might even be a good idea to have a separate computer or storage device for confidential information to reduce the likelihood of a virus brought in by personal e-mail corrupting the information, or other family or friends gaining access to the information. Thus, some aspects of obtaining informed consent become more complicated due to the fact that the information is kept in an electronic format. The ATCB Code of Professional Practice has added some clauses to the code to address some of these unique issues surrounding confidentiality when working in an electronic format.

3.11.5 As part of the process of establishing informed consent, art therapists should do the following:

3.11.5.1 Address issues related to the difficulty of maintaining the confidentiality of electronically transmitted communications, and the difficulty in removing any information or imagery that has been posted electronically if consent is later revoked.
3.11.5.2 Inform clients of all colleagues, supervisors, and employees (including Informational Technology (IT) administrators) who might have authorized or unauthorized access to electronic transmissions.

The minute you transmit information across the Internet or post it on the Internet, several more complicated issues arise. In the traditional consent scenario, you would get signed consent to show a piece of client art in a local art show in which you remove their name or identifying information. An understood and written condition of giving consent to share client information, or to have a client participate in a study, is that... (continued on page 6)
CAROL OLSON, ATR-BC

I started out as an artist with an interest in people and social causes. Someone directed me to art therapy as a means to combine artistic expression and helping others and social causes as well.

After finishing my undergraduate in Psychology from Virginia Commonwealth University, I went to study art therapy at George Washington University. I graduated in 1993 and ended up working full-time in a psychiatric hospital in Virginia as a Psychometrist; with part-time hours providing art therapy to sexually abused children. I then moved to the Mojave Desert in California. Due to the isolation of my living situation, I joined the state art therapy agencies and learned how to network. Here is where I met a few art therapists and found employment opportunities and began to think about art therapist identity and consider myself in a career. I branched out into more environments to do art therapy: residential mental health and addiction recovery, medical rehab with elderly, and private practice.

During that time, I became more aware of the national discussions taking place around art therapy identity, title protection, and the importance of certification. As someone who lived on a military post with a degree not recognized, I had no local options for jobs. I became invested in title protection and recognized identity as a professional not only for identity but for increased job opportunities. I saw more and more the power of art therapy in the lives of others the more I grew in my skills. I also saw how having recognized credentials such as an ATR and ATR-BC meant commitment to skill building and to the field itself. So even though having an ATR-BC did not mean as much in the 1990’s, and even though many art therapists resisted the structure of registration, supervision and eventual credentialing, I viewed it as both a professional and a personal commitment.

I was in the first round of art therapists who took the licensure test in 1996. It did feel odd to sit next to my professors, with so many more years of experience and take the test at the same time. Yet, as a young person finding her commitment as a therapist, it was inspiring to see my teachers also make such a visible commitment to the field of art therapy. It sent a message to me that what I was doing was important and life-changing. I felt caught up in the movement of art psychotherapy that involved a more direct path to working with someone, a language to apply to helping others that was meaningful and significant. Going for an ATR and then BC, helped me personally solidify my commitment, bond me with that identity and with others in my field. I also had a means to market myself as a committed professional even though my field was still obscure. By continuing with supervision, classes, and a board certification test, it helped me advertise to others that I am a professional who engages in a structured way with continued education and skill building in a format administrators and professionals in other fields could understand. The requirements also kept me organized and oriented to learning good habits with documentation, case presentation, and marketing that benefit me today.

I returned to Virginia, and found myself again fighting the battle for recognition as a professional. I again found it difficult to find a job in my field. Having an ATR-BC helped me find employment in a much more conservative environment and continue to grow professionally. Now I run the Rappahannock Council Against Sexual Assault. I am the Executive and Clinical Director. Art therapy is an excellent therapy to use with survivors of violence. I can’t imagine working with trauma victims without art therapy. My board certification has been useful in this position both clinically and administratively. With board certification I can host students in my agency to learn art therapy with survivors of sexually violent crimes which increases our ability to attract more students. With the credentials, I am able to use my expertise as an expert witness in court (continued on next page)
for sexual abuse and rape cases, whereas art therapists without certification or licensure are not vetted. I work in a very conservative part of Virginia, and having the BC credentials has helped me with getting recognition and respect for my field. While I agree that it’s the education and work that matters, I do think that having that oversight of continuing education, supervision, and skill-building beyond the initial degree by a credentialing organization helps other professionals see our commitment. It also helps other professionals recognize the field of art therapy and adds to our credibility.

I consider myself an art therapist first, and identify myself as an art therapist, addiction specialist and trauma specialist who is also licensed in my state as an LPC. While I have pursued additional education and certifications to fit the populations I work with, I see those additional specialties as enhancing my work as an art therapist, not subsuming it. I do hope that our continued commitment jointly across states and nationally can help us get title protection, state licensure and national recognition as a unique field. I am proud to be an art therapist and think I have the best job in the world! ☃

“Tree girl” by Carol Olson, Pen and ink

ATCB Data Collaboration with US DOL O*NET Program

Deborah Good, PhD, ATR-BC, President

The ATCB has been asked to assist with the process of debuting Art Therapy as a stand-alone occupational classification for the U.S. Department of Labor’s (USDOL’s) O*NET program. In turn, we will ask many of our current and former credential holders to assist in the process. This development is an important step for the profession, especially since Art Therapy has been considered part of Recreation Therapy in earlier USDOL classifications. Information on current classifications can be viewed at this link: http://www.onetonline.org/link/summary/29-1125.00

The process is in an early research stage. O*NET is seeking to better understand the criteria that should be used to identify someone as an Art Therapist occupational expert. Education as an art therapist and art therapy practitioner experience are two of the already established defining criteria. During the initial process it will be important to identify any sub-specialties within the profession, thereby assuring that all significant sub-specialty areas within an occupation are represented in O*NET’s random sample of Art Therapy experts.

ATCB does not usually share credential holder information with outside agencies. Because of the importance of this research, the ATCB will be sharing contact information (name, address, and phone number) with the O*NET specialists. Should you choose not to participate in this research please contact ATCB immediately and request to be excluded. You may e-mail us at atcb@nbcc.org, fax us at 336.482.2852 or send a written request to ATCB • 3 Terrace Way • Greensboro, NC 27403. Please specify that you are requesting that ATCB not share your contact information with O*NET.

Once identified, the Art Therapy occupation experts (OEs) will be invited to rate knowledge, tasks, work abilities, and other worker-related attributes by way of completing a set of questionnaires. The aggregate data from this (continued on page 9)
Ethics (continued from page 3)

the consent can be revoked at any time if the client is uncomfortable. If a piece of art is in an art show and the client revokes consent, the piece can easily be taken down and removed from the show. If a piece of art is put in an online gallery and consent is revoked, the image can be removed from the visible online gallery, but it can never be removed from the Internet. The code behind the image will always remain on the Internet. Also someone could have taken a screen shot of the page that the image was on and now can use it at will in their blog or site, or just as a screen saver. There is no way to actually permanently remove information from the Internet.

The ATCB addressed this issue in its recent revision of the Code of Professional Practice by adding in the notion that art therapists are responsible for informing clients that the consent is limited before posting or transmitting any information.

3.2.5 Only the client or guardian may give signed consent for use of imagery or information from sessions and treatment, and only for the specific uses, and in the specific communication formats, designated in the consent. Once consent has been granted, the therapist shall ensure that appropriate steps are taken to protect client identity and disguise any part of the notes, art expression or audio or video recording that reveals client identity unless the client or guardian specifically designates in the signed consent that their identity may be revealed. The signed consent form shall include conspicuous language that explains the potential that imagery and information displayed or used in any form may not be able to be permanently removed if consent is later revoked.

We, as professionals, are responsible for doing what we can to ensure that those electronic communications are as secure as possible, and to determine secure ways to store and archive information.

3.11.5 As part of the process of establishing informed consent, art therapists should do the following:

3.11.5.5 Use encrypted Web sites and e-mail communications to help ensure confidentiality when possible.
3.11.5.6 When the use of encryption is not possible, art therapists notify clients of this fact and limit electronic transmissions to general communications that are not client specific.
3.11.5.7 Inform clients if and for how long archival storage of transaction records are maintained.

Whenever you are in doubt about how to secure information, when you need to do this, or why, it is always best to consult with someone who is a professional in that area. I am a great art therapist… but that doesn’t mean that I fully understand what I am doing when I work in the online environment.

3.11.4 Art therapists should seek business, legal, and technical assistance when using technology applications, particularly when the use of such applications crosses state or national boundaries.

So, before posting that photo of a client’s artwork to your blog, make sure that not only have you taken out identifying information, but also that the consent form you have for it was signed prior to the image being posted, and that the consent states that the image specifically can be placed on the Web, and that there is no guarantee that it can be permanently removed if that consent is ever revoked.

Use the Internet for sharing your success stories and knowledge about art therapy. It is a fantastic way to promote and spread the word about our field. However, just (continued on next page)
**Ethics (continued from previous page)**

be careful that you fully understand the implications of posting information to the Internet, confidential or otherwise, and that you have all your paperwork in place before doing so. If you want more information about how to keep your electronic information safe on your computer, the Internet, or during transmission, the following Web sites are great resources:

 USC Santa Cruz: Informational Technology Services Tutorials: http://its.ucsc.edu/security_awareness/intromodtext.php

The College of New Jersey Tutorial for Faculty and Staff: Great beginner guide to understanding basic safe computing: http://www.tcnj.edu/~it/security/tutorial/

Happy and safe computing! 😊

---

**FAQ About the Exam:**

**Licensure and Certification**

Libby Schmanke, ATR-BC, Director

Q: If I have taken and passed the Art Therapy Credentials Board Examination (ATCBE) in my state for purposes of licensure, does that make me a board-certified art therapist?

A: No; if you stop there, it only applies to your state’s licensure process, and you are not authorized to use the ATR-BC designation or call yourself board-certified. However, if a separate BC application to the ATCB is made before three years have passed since your testing date, you don’t have to re-take the exam.

**Here are the details:**

The application you make for licensure (LCAT and others) is separate from the application you make for the BC credential. This is because your state awards and governs the maintenance and ethical issues for your license, while the ATCB awards Board Certification and governs its maintenance and ethical issues.

However, you do not have to take the exam twice to receive both kinds of credentials, if you follow the following guidelines:

- If you already have your ATR, go to www.atcb.org. Near the bottom of the left column, click Applications, then the link for ATR-BC Application for ATRs Who Have Passed the ATCBE for State Licensure. Upon receipt of your completed application materials, the National Office will send you a certificate and card confirming your board certification, whereupon you may use the initials ATR-BC following your name. You will not have to re-take the exam if this application is made within three years of the date you tested for licensure.

- Having the ATR is not a prerequisite to apply to take the exam for purposes of licensure. If you do not have your ATR, you have three years from the date of passing the exam to successfully complete both the ATR process and application, and the ATR-BC application mentioned above, to achieve board-certified (BC) status without retaking the exam.

Simply put, passing the ATCBE for state licensure can “count” for your BC, if the separate BC application to the ATCB is made before three years have passed. ☺️
The Benefits of Hiring a Credentialed Art Therapist
Ed Oechslie, ATR-BC, Director

As the director of an outpatient community mental health and addictions treatment agency, I have an ethical responsibility to hire qualified clinicians. Our agency is in a small fishing village on the coast of Maine. The area is remote and beautiful, has a rich history of lobster fishing and tourism, and there exists plenty of people with addiction, trauma, and related mental illnesses. In order to assure that their needs are met with professionalism and appropriate practice, the hiring of experienced clinicians with proper education and training is essential. Art therapy is proven to be an effective treatment modality for all disorders our agency treats and it is an important part of our program, but finding qualified art therapists is challenging.

Maine does not license art therapists, although there are licenses for social workers and clinical counselors. As the volume of research on creative expression mounts and the effectiveness of using art in therapy becomes more widely understood, I witness clinicians offering their clients art as a modality in their treatment toolkit. They may be great clinical professionals, but without art therapy credentials I am not assured that they have the body of knowledge the profession incorporates. I also see clinicians with art therapy degrees that either do not have or have not kept up their credentialing from the Art Therapy Credentials Board (ATCB). Again I have no assurance that they possess up-to-date knowledge in their field without the continuing education required by credentialing. State licensing for social workers and clinical counselors mandates that I hire professionals who have kept up with advances in their respective fields, but when I need an art therapist, the only benchmarks I can count on are the ATR, ATR-BC, and ATCS designations granted by the ATCB.

The ATCB exists to credential and register art therapists “to protect the public by promoting the competent and ethical practice of art therapy.” The educational requirements for registration and the additional examination for certification ensure that clinicians who work with art as their clinical medium have, through a vast body of research, learned the risks, rewards, and assets that art therapy affords. They have learned to diagnose and treat mental illness, including PTSD, depression, and anxiety. They have learned to soften the pain of chronic illness through creative expression. They have learned to bring communities together and offer those who may have no home a way to at least create something out of nothing. Art therapists have a working knowledge of creative expression, and can use this knowledge to help people foster inherent resilience and overcome adversity.

There are relatively few art therapists in Maine. With 35,387 square miles and a population of 1.3 million, there are only twenty art therapists—fourteen registered and six board certified. At the same time, there are well over two thousand clinical social workers and more than seven hundred fifty clinical counselors. Within this field of almost three thousand licensed clinical professionals, there may be some who have met educational and experiential requirements as art therapists but out of a legal necessity became licensed in another profession. There are potentially more art therapists, who for various reasons, have chosen to not become licensed in one of these alternate professions. Additionally, qualified art therapists may not have registered or become credentialed with the ATCB because art therapy is not recognized here. How is an employer to know when screening résumés? When I am looking for an art therapist, there is no reasonable way for me to screen qualified professionals, fully trained, and current in their field of knowledge, without an ATCB designation.

Finally, as art therapy becomes increasingly accepted as a profession unique in its activities and founded on solid research, more and more states are enacting some form of licensure to ensure the public safety. Most are relying on the Art Therapy Credentials Board (continued on next page)
Benefits (continued from previous page)
Examination (ATCBE) and national Board Certification (ATR-BC) as the standards for qualifications as licensed art therapists. From the point of view of an employer, and increasingly state licensure boards, it is important to hire credentialed art therapy professionals. 

NCC Update (continued from page 2)
to review our application materials, and we feel confident that we are both in compliance with the standards and have the documentation to show that compliance.

As with all approval processes, seeking NCCA accreditation has required hard work not just by the Ad Hoc Committee, but by the entire ATCB board and the staff at the National Office as well. As I have reported before, preparing to submit our application has helped us see the need to keep the process of setting and updating policy active and ongoing, not just to meet the requirements of the NCCA, but also to better conduct the business of the ATCB. I am pleased with the work we have been doing and look forward to having the application submitted, and of course, approved. Continue to look for updates from the Ad Hoc Committee in future issues of the ATCB Review to check on our progress.

ATCB with DOL (continued from page 5) effort will be used to develop an occupational profile with as many as 277 descriptors. The USDOL has a standardized protocol for the data collection process and hopes that many current and former ATCB credential holders may be able to assist within that framework.

In addition to making progress toward better establishing the identity of Art Therapy as a profession, this process may lead to a future professional occupational listing with the Bureau of Labor and Statistics (BLS). Should this occur, it will help with licensure efforts, advocacy, and could assist with work toward third party reimbursement for Art Therapists.

O*NET offers information on more than 900 occupations and is used free of charge by millions of people including students, job seekers, and human resource professionals. They rely on professional organizations such as ATCB and AATA to share their expertise to better ensure the USDOL’s O*NET data is a proper reflection of occupations as they exist in the American workforce.

Stay in the ATCB Loop!
Are you feeling out of touch or disconnected from the ATCB? Have you moved recently or do you have a new Internet provider? Help us keep you in the loop by making sure that the ATCB has your current contact information: address, phone, and e-mail address.

“Week Coffee #7” by Ed Oechslie, acrylic on canvas
Congratulations to Our New Credential Holders
February 1, 2011 to May 15, 2011

New ATCSs
Simone Alter-Muri
Susan Anand
Mindy Arce
Susan Eastman
Sunhee Kim

New ATR-BCs
Brenda Abrahamson
Jessica Callaway
Theresa Cappadora
Rafael Cohen
Veronica Flores
Cynthia Gordon
Susan Hedges
Erica Jacknin
Theresa O’Connor
Connie Ortiz
Jaime Phillips
Rebecca Spencer
Stephanie Staidle
Lisa Syrianos

New ATRs
Jenna Amoroso
Cheryl Balestra
Rosemary Barnes Pratt
Sarah Barocas
Susan Bass Kaufman
Bethany Beinke
Jessica Bianchi
Ann Blake
Rachel Braun
Jyl Brentana
Deborah Bunkley
Vicki Bynum
Melissa Cardone
Jennifer Chen
Lauren Childs
Lee Crawford
Allison DeCamillis

New ATRs (continued)
Patricia Decker
Eileen deLespinasse
Karina Diaz
Sarah Dobens
Serena Duckrow
Sharon Elkins
Meredith Fleshman
Margaret Friede
Brooke Hammond
Yvette Hardy
Jessica Heller
Elizabeth Hlayek
Jennifer Hoyt
Julie Houck
David Hudson
Alicia Hurst
Kara Jacob
Rebecca Johnson
Mari Kelly
Jee Eun Kim
Molly Landis
Rachel Lankford
Sarah Larson
Angela Libby
Mary Lindberg
Kelley Mandl-Lawrence
Deanna Mank
Sharon Marianetti
Vanessa Mazza
Meagan Moller
Hillary Mondry
Whitney Nobis
Sara O’Connor
Melissa O’Neill
Michelle Pate
Kathy Perry
Nicole Pertelesi
Andrea Picard
Sarah Pousty
Sara Pranikoff
Roberto Reyes

New ATRs (continued)
Candace Rivela
Amy Rosza
Dawn Russo
Carrie Sandman
Sharon Sarig
Maria Serricchio
Tamara Shella
Jan Shropshire
Stefanie Sigrist
Randi Spielyogel
Jamie Stanford
Gayle Torres
Deborah Ulrich
Keturah Welton
Marni Winkel
Brooke Winter-Digirolamo
Monica Zachar
Joan Zeller

There are now 28 Art Therapy Certified Supervisors, surpassing the expectations of the Art Therapy Credentials Board when the Certification application packet was created!
Why Isn’t the ATCBE Given at the Conference Hotel?

ATRs who are testing for Board Certification in conjunction with the AATA Conference sometimes ask why we don’t hold the test in a meeting room at the conference. Although it would simplify the process in many ways, there are several reasons that we don’t have the examination administered at the conference site.

First, it’s important that the testing environment provide the greatest opportunity for examinees to have a successful testing experience. At the conference, people are frequently opening doors in search of a particular session or event. Sometimes there is loud talking or other activity in the hall or in the next room. These distractions are too common in a conference setting to allow for an ideal testing experience.

Second, test security is vital. The Art Therapy Credentials Board Examination (ATCBE) is a high stakes examination, deciding who can obtain Board Certification. Employers contact ATCB daily to verify credentials. ATR-BC status and ATCBE results are reported to states for licensure purposes. It is our responsibility to protect test security in every way possible. Holding the exam in a facility that is equipped to maintain exam security and making sure it is proctored by individuals who are experienced in exam administration processes is essential to exam validity.

Although we understand that it’s not convenient to travel to the test site, we hope all examinees appreciate that maintaining the integrity of the examination is part of assuring the integrity of the credential.
A Message from the ATCB President

Welcome to the Summer Edition of the ATCB Review. This is the first hard copy of the Summer ATCB Review since the Review went electronic. The ATCB switched the timing of our hard copy edition from Fall to Summer in order for our credential holders to receive the Review before the AATA Conference, and so that we could have hard copies available at the ATCB booth in the Exhibit Hall. Feel free to pick up an extra copy and share it with your employers and friends.

The ATCB held its Spring Board Meeting April 15 – 16th. President-elect Penny Orr and the Strategic Planning Committee conducted a full half-day Strategic Planning Session on April 14th. During that meeting, the Board started work on a new 3-year plan that will go into effect on January 1, 2012. There are many exciting new things going on in the field of art therapy and with the ATCB. In this Review, several Board Members have written articles in which they share their expertise and focus on current trends effecting the art therapy profession, and also provide updates regarding ongoing projects and deadlines.

President-elect Penny Orr has written another outstanding and timely article which focuses on the ethics of social media and confidentiality. Throughout the article, Penny points out ways to avoid possible pitfalls in protecting the privacy of clients when using electronic formats. She identifies sections of the ATCB Code of Professional Practice and then expounds on their meaning, giving examples of how art therapists can protect their clients and themselves from misuse of electronic media. She encourages art therapists to seek out various professionals to assist in securing the most confidentially safe means of electronic communication. This information is vital to all our practices and becomes even more important when communicating with clients, professionals or the public through electronic means. I know that as an art therapy professional, you will find this information helpful.

The Frequently Asked Questions (FAQ) About the Exam section of this newsletter focuses on the process involved when an art therapist takes the ATCBE (exam) for state licensure and then wants to become a nationally board (continued on page 2).