The Role of the Public Member in Credentialing Organizations
Mary Ellen McAlevey, ATR-BC, ATCS, ATCB President-Elect

The Art Therapy Credentials Board is comprised of art therapy practitioners, educators, and supervisors who love the profession and work to advance it. The Board must balance advancing the profession with protecting the public. Credentialing boards must include a member who will serve as consumer advocate, and this member should not hold the credential bestowed by the board on which he or she serves (Institute for Credentialing Excellence, 2014). So, the public member’s presence on a board serves as a reminder that the board must serve the interest of the public. One example is the public member helping to clarify and define an organization’s disciplinary process. Another example is assigning grievances to ethics officers and consulting on these cases.

The public member of an organization holds the same voting rights as the other directors. Similarly, the public member also is responsible for service on committees along with the other directors. Again, these responsibilities protect the public. For example, the public member might sit on a communication committee of a board to ensure that messages sent out are clear, thorough, and not misleading.

According to the Standards for Accreditation of Certification Programs of the National Commission for Certifying Agencies (2003), the public member is “a representative of the consumers of services provided by a defined (continued on page 8)
Message from the ATCB President

The ATCB newsletter comes to you three times a year, one time in print, so that you may stay up-to-date on those changes and advancements in the profession that affect your credentials. In this edition there are many interesting articles that will help you with the credentialing process and your art therapy practice. Of interest, please note the proposed change to the Code of Professional Practice. You are invited to comment on this change before it is enacted. Also, President-Elect, Mary Ellen McAlevey, ATR-BC, ATCS, explains the role a public member director fills on the ATCB, while Heidi Tournoux-Hanshaw, LPC-AT-S, ATR-BC, ATCS tells of her journey to art therapy as this issue’s highlighted credential holder.

Please make time to congratulate all the new credential holders and take note of upcoming deadlines and added opportunities to sit for the ATCBE.

I again want to extend a heartfelt thank you to all of you who responded to the ATCB Survey. One of the more outstanding areas of comment referred to ATCB credential holders’ desire and need for art therapy licensure. While many responders termed this a need for a “national license,” it is actually an effort that must be pursued in each particular state. The ATR, ATR-BC, and ATCS are national credentials conferred by ATCB that ensure the competent practice of art therapy, but licensure can only be legislated on a state-by-state basis. This year marks 20 years since the first licensure of professional art therapists was enacted in the state of New Mexico. So far, there are four states that provide licensure for art therapists and four states that offer an art therapy emphasis under another existing therapy license. Several more states are considering various means of state certification (usually a beginning stage for full licensure). New Mexico and many others of these states use the ATCBE as their testing instrument for completing state licensure requirements. Because of the ATR-BC’s accreditation by the National Commission for Certifying Agencies (NCCA), the ATCBE holds the national standard for excellence in measuring the (continued on page 6)
Art Therapy Credentials Board

Board Certification (paper-pencil)

Exam Date and Locations

SATURDAY, November 8, 2014
New York, NY
(Expressive Therapies Summit)

Next year: SATURDAY, JULY 11, 2015
Albuquerque, NM
Baltimore, MD
Reno, NV
Louisville, KY
New York, NY
Rochester, NY
Minneapolis, MN
(AATA conference)

The final application deadline is May 27 to take the exam on July 11, 2015. ATRs applying for Board Certification by the April 29 deadline save $25 off the regular fee of $260. Unless you are approved to test for licensure in New York, New Mexico, Maryland or Kentucky, the only way to test is by first obtaining the Registered Art Therapist (ATR) credential. If you are not already an ATR, your complete ATR application packet must have been received in the ATCB National Office by March 16, 2015, if you intended to apply for Board Certification by May 27, 2015 and take the ATCBE on July 11. Individuals planning to test for state licensure must be approved to test by their state’s licensure board. The Maryland board approves and provides the examination application and the applicant then registers through ATCB. The New York Office of the Professions oversees the approval process, and the applicants register to test through ATCB.

Please see the Examinations page of www.atcb.org for more information, including the preparation guide or contact the ATCB National Office.

Proposed Addition to the Code of Professional Practice

At its Spring meeting, the Board of Directors discussed the addition of an item to the ATCB Code of Professional Practice. The item requires art therapists who give presentations to non-art therapists to remind audience members that attendance at said presentation does not qualify them for competent practice of art therapy. The proposed addition is included in this newsletter, so that credentialed art therapists are able to respond prior to its inclusion in the Code. Credentialed art therapists wishing to comment may do so by writing: atcbinfo@atcb.org or Attn: Code of Professional Practice Public Comment, ATCB, 3 Terrace Way, Greensboro, NC 27403-3660.

The period for public comment will end on August 14, 2014.

Proposed Addition:

1.5.8 Art therapists are encouraged, whenever possible, to promote public understanding of the principles and the profession of art therapy, including through presentations to general audiences, other mental health professionals, and students outside formal art therapy programs. In making such presentations, however, an art therapist must avoid conveying the impression that the audience members or students will become competent to practice the profession or the techniques of art therapy, and the art therapist must, through conspicuous language, disclaim any intent or ability to teach such competence.

[Subsequent subsections of the Code will be renumbered accordingly.] ☀️
I firmly believe that every path I have chosen has led me to the spot I am meant to be. Doors have opened that I have never imagined and have taken me to where I am today. Even though I have had a few missteps, I wouldn’t change a thing. I grew up in suburban Canton, Ohio to a mother and father who loved me and my siblings dearly. I remember as a child having a love for drawing and ‘making,’ nurtured by my mother and grandmother who provided many opportunities for visual expression.

Art has always been a relaxing avenue of expression for me, as was reading and learning. I remember early on—from probably around the age of 11 or 12—knowing that I wanted to be an artist, but also knowing that artists have a rough time making a living. I vividly remember thinking that I would need to choose another career as well, and I had a fond admiration for the work of Dr. Jane Goodall with wild chimpanzees. Knowing that would be an amazing, but practically unattainable dream, I remember thinking: “I do like listening to people; maybe I should be a therapist”. I was a quiet child in a family of talkers, but I didn’t realize that until I was studying my genogram in graduate school.

As I moved through high school, I knew I wanted to go to college, but I wanted to find an undergraduate program in which I could double major in psychology and in art. I kept up with my drawing, and excelled in academics in school while exploring my compassionate side as I joined the then ‘nerdy’ environment club (my how times have changed!). I started to become more and more interested in caring for the environment, and my good friend at the time encouraged me to go with her to lifelong mentor, Dr. Jane Goodall was the keynote on the last day of the conference, and I jumped on the opportunity to hear her speak live. I was enamored by the speakers before Dr. Goodall—a husband and Dr. Roger and Debbie Fouts—who ran a non-invasive laboratory for captive chimpanzees housed within the psychology program at Central Washington University in Washington State. The feature that made their program so appealing was that the chimpanzees that participated in the program could volunteer for the research, and was all based in the use of sign language. I decided right then that I would pursue undergraduate studies at Central Washington University. Luckily, I had high academics because it didn’t even occur to me to choose a backup plan. I was accepted not only into the university, but into the honors College, and I took the leap to make a geographic move (for the very first time ever in my life) and start classes in the fall of 1997.

I remember the day I put in my application to become a volunteer at Chimpanzee and Human Communication Institute (CHCI). I was instructed to go to the back door of the building and ring the doorbell. I was greeted by a graduate student who was wearing a necklace made of colorful noodles, and I later learned he was doing art enrichment with the chimpanzees. I immediately felt like I belonged, and spent the next four and a half years balancing between psychology classes, art classes and studio hours, work and hours at CHCI, where I was
reminded that my role was to serve the chimpanzees. I had a huge respect for the professors, graduate students and fellow undergraduate volunteers in that here, and yet these creatures did not. It was our program, because we all felt that we had a choice to privilege to make meals, wash laundry, participate in graduate research, entertain the chimpanzees, and of course, don the rubber boots and hose down a lot of muck to ensure that the chimps had a tidy, healthy living space.

I met my husband during orientation week at college. We lived in the same dorm our freshman year, and even though we were friends at first, I knew he would be around for a long time. He encourages me all the time with my crazy ideas, especially when it came to graduate school. I remember being in the painting studio late one evening at the beginning of my senior year, and there were two girls that I knew from my psychology courses. They were out of context, so I asked them about their paintings, and how they ended up in the studio. They told me that they were taking the course as a prerequisite to their art therapy graduate program, and discussed the programs available in the area. Suddenly my path just made sense. I had the psychology background, and I had the art background. Knowing that my husband’s family was from the Seattle area, I applied to one graduate school and made it into Antioch University Seattle to start in the fall of 2001.

My graduate program prepared me very well for what to expect as I moved into practice. I am so grateful for the personal connections that my professor had in the Dallas area, because that connection became my mentor, and she introduced me to the local, albeit small, art therapy community in north Texas. She encouraged me to join the local chapter of the American Art Therapy Association. I was warmly welcomed into this community. I completed my graduation requirements in internship and was offered my dream job at a non-profit art therapy clinic in Fort Worth. I was encouraged to complete the necessary internship licensing requirements in order to practice in Texas as a professional counselor, and I concurrently collected hours as for obtaining the ATR. Taking the board certification exam was highly important for my job, lending credibility to the fact that we run the only art therapy non-profit in north Texas. It is further important to note that in North Texas, there are only a handful of people to date that hold the state’s specialty designation in art therapy, and the results of the BC examination were important for me in obtaining that specialty designation.

The future of art therapy in Texas is exciting right now, even though we are lacking in one major area of growth, which is not having a graduate degree program in art therapy in our state. Despite that, we are witnessing an influx of students from distance education programs that live in Texas. Our agency is fortunate enough to allow the use of graduate level practicum students to work with our clients, and my current position as clinical director is to supervise the work that they do. We have approximately seven practicum students at any one time from various programs. At the Art Station, it has been our goal to ensure that student interns are trained properly in how to use art appropriately with clients, as well as the proper terminology to use to identify themselves professionally until they have acceptable education and credentials.

One of my favorite parts of my job is that I get to make art with the students (continued on page 8)
President’s Message (continued from page 2)

competency of the practice of art therapy, and contracts for the administration of the ATCBE in states wishing to license art therapists now and in the future. This ensures that state licensed art therapists meet national standards of competency.

In 1993, when the ATCB was separated from the American Art Therapy Association (AATA), AATA was able to continue to advocate for art therapy related interests, including state licensure, while the ATCB concentrated on developing standards for professional practice and a method of evaluating competent practice within the highest standards. AATA, as the membership organization, has been very active in advocacy efforts on the state and national level. ATCB, as the credentialing body, develops new standards as the profession matures, provides information on a regular basis to states in which art therapy licensure is being pursued, talks and provides information to art therapists who are writing bills for licensure in their states, and offers the ATCBE as the examination to be used for state licensure.

The process for art therapists to achieve multiple credentials is expedited when states providing state licensure use the ATCBE as their means of examination. As explained in the credentialing article in this issue, an art therapist can apply for board certification with the ATCB after passing the ATCBE for State licensure. The art therapy credentialing process has been streamlined so that an art therapist can use their testing scores (when the ATCBE is used) for state licensure as well as national credentialing (ATR-BC) with the ATCB.

Why doesn’t the ATCB actively lobby for state licensure? Our focus has to be on the mission of protecting the public through the credentialing of art therapy professionals. The ATCB has a tax status of 501(c)(6). Although with this tax status, influencing legislation and actively supporting causes that affect our profession is permitted, the ATCB would be required to track the percentage of its expenditures that went toward those efforts and report that to its credential holders and to the IRS. The percentage of your fees that were used for lobbying efforts would no longer be tax deductible. If the ATCB were to actively lobby, it could bring the efficacy of our credentialing process under scrutiny by the NCCA. What we will not do is anything that would undermine the high standard of the art therapy examination and or lessen the value of our credentials to you, the credential holder. What we will do is to continue to provide the background support work to inform states of the rigorous art therapy credentialing process, the examination that is available for state use in licensing art therapists, and provide credential holders with informational support in their pursuit of state licensure.

ATCB Annual Renewal

The ATCB’s annual renewal and maintenance fee is due no later than June 30th each year. If you have not submitted yours please do so right away to avoid the loss of your credential. If you did not receive your annual renewal notice please contact us at 877-213-2822 or by email: atcbinfo@atcb.org and we will be happy to send you a copy.

Please remember: it is your responsibility to inform the National Office of any changes in your contact information.

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FAQ: Will this year’s Art Therapy Credentials Board Examination cover the DSM-5?
Libby Schmanke, ATCB Director, Secretary, and Board Liaison to the Certification Committee

The ATCB Certification Committee met earlier in 2014 and finalized this year’s version of the Art Therapy Credentials Board Examination (ATCBE). One of their tasks was to update the material in accordance with the new Diagnostic and Statistical Manual of Mental Disorders (DSM). The overarching goal of their review was to ensure that questions are relevant to the competent provision of art therapy, regardless of the DSM version with which an examinee is most familiar.

Prospective examinees will be glad to know that there are no structural changes to the exam as a result of the review; there is not a different or greater focus on DSM material than in the past. The purpose of the exam is, as always, to assess the examinee’s competence as an art therapist. Although art therapists must be knowledgeable of diagnostic terminology in order to communicate with others and guide the choice of appropriate treatment interventions, psychiatric diagnosis is not a core competency of art therapy. Therefore, the ATCBE has never had a focus on diagnosis per se, but it does examine how art therapy can assist those with various diagnostic profiles.

In essence, changes that have been made to the exam are limited to updating language in those questions containing diagnostic terminology that changed in the DSM-5. To give a broad hypothetical example, if a former question described a client as having Asperger’s Disorder and asked for an appropriate art therapy intervention, the question might now describe the client as having Social Communication Disorder or Autism Spectrum Disorder instead. A test-taker who trained under DSM-IV is unlikely to encounter difficulty understanding such a revised question, even though it uses a new diagnostic label. As a professional, you are responsible to be knowledgeable of any major developments relevant to your field. All art therapists are encouraged to read the new manual, attend continuing education, or make use of online sources about the DSM-5. At the same time, you can reasonably assume that if you were a competent provider of art therapy while DSM IV-TR was in effect, you will not become incompetent due to the arrival of the DSM-5; and that your overall competency will be reflected by your exam score.

In conclusion, the short answer to this FAQ is, “Yes, but don’t panic!”

More information about exam locations, dates, and applications may be found elsewhere in this newsletter and on the ATCB website.
in our group supervision sessions. Exploring the materials and the dialogue and problem solving as it occurs during supervision sessions has strengthened my own clinical work. At times I feel I learn more from the students than they learn from me! My status as a state approved supervisor allows our agency to supervise these students in their practicum hours for graduation. This path has been an exciting one for me, even though we definitely have had our bumps in the last few years. My husband and I lost our baby daughter three years ago to a heart defect, and while that was probably the saddest, most difficult part of my life, we have learned that even in her death, we have had to challenge ourselves beyond what we ever thought capable.

I am blessed to be the mother of an angel, and her short little life again humbles me to know that it is my role in life to serve those around me with as much grace and gratitude as I possibly can, because this moment may be the only moment I have to impact someone’s life, whether that is my surviving daughters, my clients, my students, or perfect strangers. This path toward genuineness has been my foundation, and will continue to be as I continue to grow in this profession.

Public Member Role
(continued from cover)
certificant population serving as a voting member of the governing body of a certification program.” The public member brings viewpoints that are free from insider bias to discussions and strikes a balance between protecting the public and filling some needs of the credential holders (Seacrest Company, 2006). In order to remain free from bias, the public member, as previously mentioned, should not hold the credential from the organization on which he or she serves. Furthermore, the public member cannot be an employee of credential holders or individuals in the profession or an employee of any certification organization or derive more than 5% of his or her total salary from that profession or have done so in the past five years (Seacrest Company, 2006).

The Art Therapy Credentials Board is grateful for the work of Jennifer Stone and Kip Purcell, each of whom has served as the Board’s public member at various times during the past three and one-half years. It is because of their commitment to public protection that the mission of the ATCB, “to protect the public by promoting the competent and ethical practice of art therapy through the credentialing of art therapy professionals,” is best accomplished.


Have a safe summer!
Congratulations to Our New Credential Holders
February 1, 2014 to April 30, 2014

New ATCSs
Carolyn Brown Treadon
Pamela Ullmann
Kendra Wagner

New ATR-BCs
Gail Bacher
Christa Brennan
Karolyn Brosnan
Elizabeth Burks
Roderick Castle
Darrel Edward Charbaszcz
Elizabeth Culbertson
Julia Deets
Lindsay Dekich Ratushny
Deborah Douek
Jean Drumm
Adriane Esposito
Carrie Ezell
Elizabeth Gardner
Morgan Gaydos
Patricia Ghubril
Dana Gramp
Kimberly Gunelson
Michaela Herr
Audrey Hook
Rachel Houseman
Jee Yeon Lim
Amanda Lynch
Kathryn Martin
Erika Mayer
Kimberly McClannahan
Deanna Miesch
Erin Potash
Karle Schwartz
Heather Spooner
Bethany Stiltner
Sarah Tarzik
Hirok Tsukada
Roselynn Vanderpool

New ATRs (continued)
Rebecca Asch
Teresa Barrett
Laura Beaudoin
Elizabeth Berkenbush
Erica Bogart
Dana Bordsen
Mina Bressler
Megan Campbell
Mary Cash
Laura Chamberlin
Rachael Coffren
Cicely Comandari
Julie Combal
Felicia Cota
Elizabeth Couturier
Lauren Cruz
Brenda Cunningham
Nina Dalangin
Amber Davis
Suzanne Deigan
Marie Doll
Karina Donald
Lisa Dorner-Zupancic
Jennifer Duncan
Tamara Eberle
Tana Espino
Susan Falato
Melissa Fannin
Frank Florence
Richard Flynn
Areka Dorr Foster
Jennifer Fox
Deborah Fung
Tamara Galinsky
Heena Genti
Ashley Gerolstein
Elizabeth Guest
Nichole Hall
Christine Hendron
Leah Hicks-Wolf
Krista Hiner
Kate Horn
Lindsey Hurrle
Carrie Ishee

New ATRs (continued)
Sunset Karner
Nataunya Kay
Juhee Kim
Erin Kompf
Lauren Kramer
Jaclynn Lally
Jennifer Lanza-Linn
Claire Lapiska
Scarlett LeVan
Stacy Lieberman
Amanda Lightner
Rhonda Mathis
Heather Matson
Lauren McCarthy
Kelly McCormack
Molly McDavitt
Eileen McKee
Laura Michalski
Anna Mills
Julie Moreno
Theresa Mueller
Brittany Nalley
Jessica Navin
Rebecca Ogilvie
Michelle Olson
Ashley Ordner
Hyunjung Park
Megan Parrish
Katherine Pavin
Shauna Perry
Chakriya Phal
Elizabeth Raggi
Brandilyn Ray
Renee Redaelli
Veronika Redtschitz
Michelle Rismet
Hankyung Ryu
Anna Sandoval
Lynn Marie Saso
Margaret Saul
Stefanie Scannell
Jennifer Shafi
Molly Simkins Sluk
Elizabeth Skok

New ATRs (continued)
Rebecca Snyder
Linda Sweeney
Hoi Lam Tang
Anna Vargas
Celeste Wade
Diana Wallace
Laura Wanderling
Valerie Whitaker
Margaret Whitehair
Hannah Wilson
Stephanie Wolff
Suzanne Yau
Sarah Elise Yazdian

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www.atcb.org

Search credential holder status in Find a Credentialed Art Therapist
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Code of Professional Practice
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Recertification Standards
ATCBE Preparation Guide
Continuing Education Tracking Form
and more!