HF2743   
Health Finance and Policy Committee  
Position: **Favorable**  
American Art Therapy Association   
February 22, 2024

**Chairwoman Liebling and Committee Members,**

Art therapy is a unique therapeutic discipline that utilizes active art making and specialized training the creative process, neurobiological implications of art-making, art-based assessment models, and applied psychological theory within a psychotherapeutic relationship to enrich the lives of individuals, families, and communities across Minnesota and the nation. The two primary reasons that licensure for Art Therapists at the state level is important is to increase accessibility for necessary and effective mental healthcare and to prevent public harm that comes from inadequate training and limited regulation.

Regarding access, there are two considerations. First, art therapists are uniquely equipped to provide critical mental healthcare for members of our community for whom language and communication barriers may present issues for traditional talk therapy, including those so young that they do not yet have the words to express their trauma, elderly clients who may have lost those words, or those who do not speak English as a primary language. As an art therapist myself, I worked in preschool Day Treatment with children on the Autism spectrum and found art therapy-specific interventions to increase emotional regulation, self-expression, and social engagement with other children, all challenges traditionally faced by individuals with Autism. I have additionally worked with adult women ages 24-48 who have experienced past sexual assaults and were unable to work through the long-term impact of those experiences in traditional talk therapy settings. Art therapy allowed them to externalize their emotions and thoughts, actively and visually change the narrative, and find a positive self-identity again through art-making and creation of visual metaphors in the artwork. They reported changes in mood and thought patterns, and reported art therapy “saved them”.

Another aspect of accessibility to consider is the upcoming changes to the U.S. licensing and educational landscape of mental health professions. Art therapy higher education programs and higher education programs for marriage and family therapy and counseling fields are accredited by two different credentialing bodies, CAAHEP and CACREP. However, because the standards for each program cover such a broad shared core, art therapists have historically qualified for licensure under those related titles because of clauses in licensing laws allowing for substantially similar academic backgrounds to qualify, albeit often with additional testing or application components. Unfortunately, without art therapy licensure, this stop-gap measure has become common practice for those interested in becoming art therapists. But now, even this temporary solution may no longer be an option, and art therapists are at risk for no longer being able to receiving licensing in the other mental health professions. As of January 1, 2024, CACREP, the body that accredits counseling education programs, has updated its educational standards to be more counseling-oriented, thus making it extremely difficult, if not impossible for art therapists to earn a counseling license with an art therapy degree. As interstate compacts utilizing CACREP standards continue to expand across the nation art therapists are in desperate need of an avenue to continue practicing. As a supervisor for art therapy interns, I am concerned that students will have limited job opportunities and limited ability for job growth once they graduate. Without the ability to enter the field through a unique license, art therapy graduates may face the difficult choice of whether to return to school for a more counseling centered degree or accept jobs below their skill level. This would effectively shrink the field, shrink the number of students coming to Minnesota for their Masters in Art Therapy, and shrink the number of practicing art therapists in Minnesota.

Finally, a state license for art therapists would provide protection for the public from harm caused by inadequately trained practitioners. Despite warnings from researchers that untrained mental health practitioners have a likely lack of preparedness for powerful reactions often evoked by art and art materials, and uncertainty about how to use artistic processes to bring such reactions under control ([Hammond & Gantt, *Journal of Counseling & Development, 1998*](https://onlinelibrary.wiley.com/doi/abs/10.1002/j.1556-6676.1998.tb02542.x)*),* the American Art Therapy Association continues to receive reports of mental health providers misusing art therapy interventions as a result of inadequate training which then deters clients from seeking mental healthcare or, in some cases, finding themselves in new or worsening patterns of self-harm.

In Minnesota, we have received reports of mental health colleagues that are not trained art therapists attempting to use art therapy interventions resulting in individual and group dysregulation, lack of containment in groups, increased behavioral outbursts, inappropriate processing of traumatic events, and in one case a large collaborative art piece being torn apart and destroyed leaving clients angry, in tears and without the capacity to process the event. It is vitally important to public health that we ensure that qualified providers are clearly identifiable, and only those with the necessary knowledge and training are permitted to practice.

Lastly, I implore you to consider the lack of access to mental health care in general. Not only does a lack of licensure risk public harm through untrained practitioners, it creates harm by reducing public access to mental health care. Currently 165 million Americans live in mental health care professional shortage areas, of that 2.4 million live in Minnesota. By licensing art therapists, we can encourage graduates to remain in the state post-graduation to serve Minnesotans in need rather than pursuing employment in states that offer licensure.

HF2743 serves to address a variety of problems. This legislation provides a low-cost solution that will serve to protect the public, support consumer choice and awareness, and allow the most at-risk communities in the state to have access to life-saving care that will quickly disappear without its passage. Minnesota art therapists and the American Art Therapy Association respectfully ask that you vote to move this legislation forward, helping to guarantee access to best-fit care for all Minnesotans.

Thank you for your time. I am happy to answer any questions that you may have regarding art therapy or this legislation.

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