

The Art Therapist's Professional Developmental Crisis:
The Journey From Graduation to Credentialing

by

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A Culminating Project Contextual Essay

Submitted to the Faculty of the Graduate School, Mount Mary University,
in Partial Fulfillment of the Requirements for the
Degree of Doctor of Art Therapy

Milwaukee, Wisconsin

May 2017

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2017

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The Journey From Graduation to Credentialing

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Abstract

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This contextual essay is part of a multimodal doctoral project. The author used a qualitative mixed-methods research design to investigate the experiences of art therapists' journeys from graduation from their art therapy training to successfully obtaining their art therapy professional credentials as registered and board-certified art therapists (ATR-BC). Outcomes of the study revealed that art therapists enter a professional developmental crisis upon graduation. New art therapists launch from training as new professionals and the transition into the workplace contributes to this crisis. Newcomers must transition into their new organizations, and job fit and satisfaction impacts their adaptability to the transition. Professional socialization helps novices learn how to be in their profession as well as how to enter and join workplace systems. The process of transformation has implications for stakeholders (students interested in the art therapy profession, art therapy educators, art therapy supervisees, art therapy supervisors, employers, and the natural supports in art therapists' lives). Using phenomenological interviewing, 8 recent ATR-BC recipients participated in this study by making art about their professional journeys to credentialing, then participating in an interview with the author. The author engaged in arts-based analysis and created an illustrated video story. A website was created to host the video and other components to be used for facilitating ongoing discussion about new art therapists' journeys.

Acknowledgements

Thank you, Dr. Lynn Kapitan, for teaching me how to navigate the high seas of art therapy research. You appeared as an encouraging voice when I was stuck in the muck and you helped me use my wings. Dr. Bruce Moon, thank you for deepening my relationship with art in supervision and turning my attention to my “warrior heart,” an invaluable gift that will reach newcomer art therapists.

Dr. Dave Gussak, it has been an honor to dialogue about my ideas with an art therapy leader whom I hold in such high esteem. Dr. Emily Nolan, you are a role model and I am so thankful for your encouragement and wise perspective of normalization. Thank you to the Mount Mary University art therapy faculty. I believe that I was witness to a dream team, givers of priceless knowledge.

Thank you to the tenacious art therapists who donated their time and pieces of their heart to this study. You inspired me. I hope that I have honored your stories and art and that together we inspire new art therapists. To artist Susan O’Neil for helping me find the story. To my spirited students who energized me in this process. Finally, to my cohort, for being my supportive like-minded peers, my co-journeymen, and my friends.

Dedication

I dedicate this work to my husband, Shawn, and our sons, Nolan and Devon. All of you sacrificed something so that I could complete this. Shawn, you always support me. I love you. Nolan, you came along with us on this ride during your first weeks of life and Devon, you joined us midway through this process. You are darling little people who made our lives even better. Thank you, boys, for letting mommy work. Now we can play!

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List of Portfolio Works

“Journey to the ATR-BC: Tangle, Tenacity, & Trust” (Website With Video and Participant Art): <http://arttherapyjourney.com/>

Video 1 Journey of the Bee: <https://drive.google.com/open?id=0B1FgJI1-VxedSFFwRW1odFhqT1E>

Video 2 Tangle, Tenacity, & Trust: <https://drive.google.com/open?id=0B1FgJI1-VxedVDQ1ZDRJU0VpeUU>

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CHAPTER 1: INTRODUCTION

The highest professional art therapy credential an art therapist can obtain is Art Therapist Registered-Board Certified (ATR-BC). However, the path to this credential can be fraught with anxiety and insecurity for many new graduates. No literature exists that specifically documents the art therapist's transition to this credential between graduation and certification. The purpose of my study was to investigate the developmental experiences that newly credentialed professional art therapists have had between entry into the art therapy profession upon graduation from their art therapy training and attaining their professional credentials. My aim was to provide needed data to the profession (i.e., new art therapists, students, and art therapy educators and supervisors) regarding the implications of an important developmental transition. If a typical career trajectory for novices is known, then mentors and supports can normalize what can be expected. In turn, peers can authentically dialogue and support one another through their experiences if those experiences are understood as normal. The goal of my research was ultimately to help other art therapists survive and thrive in the profession, because art therapy is important work.

My interest in this study topic stems from my experience navigating the transition from being a new graduate to being a credentialed professional. I encountered many of the challenges that I found about this topic in my review of the literature from art therapy and other helping professions. The literature of art therapy, counseling, and related fields describes areas of development for the new professional in transition, but it was not until after completing this study that I was able to name this period as a professional developmental crisis. The outcome of the study, an allegoric creative video story that can

be used as a teaching tool, presented the process to me as objectively observable.

Creating the video allowed me to view the professional development process from a distance and as whole, and, through metaphor, it offered a necessary vantage point for identifying that the period was in fact a professional developmental crisis filled with a series of trial and error.

During my own professional developmental crisis, I attempted to understand myself as an art therapist, as a member of a larger system, and in relation to other helping professionals. I turned to my peers for support and guidance. I was surprised by the narrative that I encountered and authored, of challenge, difficulty, frustration, marginalization, feeling misunderstood and underappreciated, and feeling like there are more walls than roadways to provide the services art therapists are trained to do. I felt isolated in my surprising and disappointing experience of struggle, low pay, and being taken for granted by agencies and the mental health systems I worked in. I also felt a sense of disconnect when I attempted to seek validation from my peers' experiences. I was confused by my art therapy peers' and other colleagues' responses and didn't know if what I was experiencing was normal for others in similar circumstances. I experienced mixed messages when professional colleagues in related professions expressed how much they appreciated art therapy and its benefits, but still seemed to limit when and how I could be an art therapist. I felt misled and abandoned. I wanted to find someone to blame.

I often blamed myself for my struggles on the path to credentialing. When I reached out to my peers and mentors for reassurance that difficulty was normal, I did not feel as though I received authentic feedback about just how challenging the work and process could be. I did not always understand the reality that the process of navigating

and surviving the art therapy field can be challenging. What was I expecting? I recall one brief moment with one of my mentors when she shared with me privately, “the road may be very hard, and very lonely.” At the time, this message was not strong enough to penetrate my naïve idealism that was compounded by my preoccupation with training requirements at the time. I continued my training having forgotten what my mentor had disclosed. Yet her comment remained with me, deeply buried and then resurfacing much later post-graduation. I was thankful for what she shared and grateful that I remembered it because I felt validated and reassured while I finished working toward credentialing.

My personal experience of survival and thriving required flexibility, a strong work ethic, passion, a good support system, determination, courage, resilience, and endurance. My journey was filled with emotional highs and lows. Initially, I was willing to take any job that remotely connected me with a chance to use art therapy. I changed jobs several times throughout my early career, was willing to take major risks, relocated several times, incurred much student debt, and struggled financially, sometimes living below the poverty line. Despite the difficulties, I enjoyed my work. I loved the creativity of it and the connection I felt with so many people along the way. I felt a sense of purpose and was grateful to be in a constant state of creation—building art therapy programs, teaching colleagues and the public about art therapy, creating change with clients through creative means, and paving the road for the next art therapist. I felt I had meaning and purpose in my life and that was my priority. Did other art therapists who made their way through the early stages of their careers at the entry level have these same struggles? I could only imagine that art therapists who are currently on the path to credentialing might have similar questions. I admired my art therapy predecessors and

wondered how they survived. I suspected that successfully transitioned art therapists had recognized that hard work pays off, and that success and salary are not simply passed out along with the master's degree diploma.

As I contemplated how art therapists complete their journeys to credentialing, I imagined the art therapist mingling with the real world upon entry into the profession much like interspecies interactions and evolution in biology. When survival is at stake, adaptation can occur quickly (Thompson, 2010). For example, a soapberry bug feeding on small native North American apples originally spread the native apple seeds, resulting in both species' survival. As non-native apple tree species with larger apples were introduced in North America as crops, the new apple fruit were too large for the bug's beak. Survival for the bug was at stake. Therefore, the soapberry bug evolved a longer beak designed specifically to reach deep within the new larger apple fruit. This interspecies interaction led to a satiated soapberry bug that also successfully extracted and spread apple seeds for tree repopulation (Thompson, 2010). Newly graduated art therapists may similarly need to evolve to fit into a system of practice while advocating for art therapy's growth and development. Perhaps the art therapists carry theories from training, personal values, and individual conceptualization of art therapy and roles but face a "larger apple fruit" than they are equipped to handle. Will they wither and die from starvation, or will they evolve and learn to adapt their theories and practice to be able to consume the fruit and survive and thrive? Plainly stated, will they maneuver through the developmental crisis between graduation from a program and becoming credentialed and remain in the profession long enough to achieve their ATR-BC?

The reality is that art therapists who launch from their graduate training into the professional world may become disillusioned and frustrated with the normal tasks of therapist development that they will face. Educators usher them through the process of training to be art therapists and land them into a developmental crisis. I wonder if most new art therapists truly understand the effort required to become credentialed and the fact that struggle and adaptation is a necessary part of the process. Some art therapists have adopted dual professional identities or have abandoned art therapy all together when the journey becomes too difficult to endure. Nevertheless, other professions require effort, time, patience, investment, specific licensing requirements, and professional status through experience. Why do art therapists sometimes expect themselves to be exempt from that reality? As I contemplated these questions, I decided to identify the characteristics of the transition in a way that might shift the narrative of unfair struggle to a more positive, productive one about normalcy and resiliency. I propose that such knowledge may validate the journey as part of the process, which is important to art therapy students, who I believe have the right to be informed about the reality of the transition as much as they have the responsibility to accept the characteristics of the transition if they want to survive and thrive.

“Non-survival” in terms of not obtaining one’s ATR-BC credential (American Art Therapy Association, 2015) and/or leaving the helping profession altogether is a real possibility. Art therapists are sometimes tasked with “professing” the ideals of art therapy (Feen-Calligan, 2000) in the workplace to advocate for their identity, value, and scope of practice in order to show outcomes and create jobs. If art therapists want to obtain their ATR-BC, the undertaking is theirs alone. This step is assumed to contribute to the vitality

of the art therapy profession (Gussak, 2010), although members of the profession have questioned how important this step really is (Gussak, 2010; Wadeson, 2004). Earning an ATR-BC is not technically a requirement to practice and the credential is not always recognized in the workplace, so what is the incentive to work through such difficulty?

New art therapists enter a profession that is well established but still evolving in its legitimacy and definitions. Historically, “intellectual and sociological developments in the late 19th and early 20th centuries gave rise to the climate” in which early art therapy ideas took hold (Junge, 1994, p. 2). The ideas of art therapy pioneers gained momentum and collective energy over the generations (Junge, 1994). As more art therapists discuss deeply what it means to be an art therapist and what the work is comprised of, the topic has become complex and diverse. Intellectual and sociological developments create the contemporary postmodern climate in which art therapists exist (Karkou, Martinsone, Nazarova, & Vaverniece, 2011). Feen-Calligan (2000) summarized that in its beginning, the profession of art therapy emerged through the excitement of the collaboration that created it, as compared to today’s students who learn their profession—an industry and an art—through education programs and enter into sometimes-established practices. Today, such art therapy programs often prepare students for professional entry into the workplace by providing dual training in counseling and art therapy (Feen-Calligan, 2012), which helps graduates with employability but also affects professional identity formation for some art therapists.

C. Moon (2002) shared that she needed to not only adapt to the drama of the job market, but participate as well—with imagination and action—in order to be able to do the art therapy work that she loved. She described reenvisioning her role as an art

therapist, which allowed her to thrive, stating that “the goal is not to create the ‘perfect’ art therapy job, but to create the best one we can out of circumstance and potential we encounter” (C. Moon, 2002, p. 27). Imagination, creativity, and resourcefulness could be the most basic of survival skills for the art therapist in an already evolved and continuously evolving professional climate (Gussak, 2015; Kapitan, 2012; MacLagan, 2007; C. Moon, 2002). Understanding what to expect can help to equip and arm future art therapists with realistic expectations, so that they can work with a sense of fulfillment and satisfaction. Art therapists might decide to obtain their credentials if they feel fulfilled by their professional role.

When I sought to research the topic, I learned that there is no art therapy research literature that systematically and specifically studies the period of transition from novice art therapist to credentialed professional art therapist in the current working climate. That said, art therapists have documented experiences, observations, and systematic research about professional identity—information that an art therapist can piece together to understand what it might be like to become a credentialed art therapist. A consistent narrative exists that becoming an art therapist is not easy; that it is “filled with turmoil, anger, devaluation, intensity, and tangled jumbles of pain, anxiety, excitement, and fear” (B. Moon, 2003, p. 29). Malchiodi (2004) referred to the process of credentialing as a maze and attempted to map out strategies for success. She described the art therapy industry as unpredictable, cautioned newer art therapists to carefully consider joining the profession, and challenged art therapy educators and supervisors to address these concerns economically and ethically. Malchiodi drew from her personal experiences of navigating the art therapy profession and from her work guiding students and supervisees

to highlight real factors for consideration, such as post-education hours, student debt, advocating for one's worth, endurance and resiliency, and adaptation to the professional climate.

Art therapy is a younger field than closely related, more established and regulated helping professions such as nursing, teaching, psychology, career counseling, and social work. Because some closely related fields are larger and more established, they have more research about novice practitioners and aspects of their development, as well as a more defined collective identity. The art therapy profession has taken lessons from other professions in order to establish legitimacy for its members internally and among non-art therapists (Feen-Calligan, 1996). However, art therapists seem to still be establishing legitimacy beyond the internal professional requirements for its members. The process of becoming a practitioner of any helping profession can be expected to include considerable effort, and art therapy is no exception.

In this qualitative mixed-methods research project, I interviewed eight art therapists who had recently obtained their ATR-BC, and invited them to share their stories of becoming professionally credentialed via art making and metaphor. I asked them to make an image about their journey from graduation to credentialing and then, while studying the image, to tell me the story through metaphor. After gathering data using a phenomenological method of inquiry, I shifted into arts-based analysis and creative immersion. I integrated participant art imagery and narrative into a retold, collective story. I allowed the creative process to unfold, which resulted in writing a fable about a purple bee that goes on a journey to find a pollen patch. I created digital imagery and produced a narrated video story. I shared the video with the participants and hosted

an online discussion forum, discussing emergent and specific issues in the story. I then revised and edited the video to incorporate feedback, once again sharing it with the participants. The process was rewarding for me personally because it led to a feeling of normalcy in my own experiences, and participants reported that the opportunity to share their lived experiences to support incoming art therapists and then see and feel a creative synthesis of their voices and visuals was rewarding for them as well.

I designed this research project to fill the gap of knowledge in the art therapy field on the lived experiences of art therapists who have completed the transition to full credentialing in the current workplace. The portfolio components of this research project stimulate interactivity through visual, written, and verbal modes. The results of my arts-based analysis tell an emotional, experience-based story, through metaphor, of the journey of becoming a credentialed art therapist and invite ongoing discussion among many levels of art therapists. The literature review moors the data into the context of research and theory in art therapy, counseling, education, psychology, social work, and related helping professions. I believe the final art product and portfolio that I created will be important to the art therapy profession because it can be used as a dynamic tool in art therapy education and supervision to address the problem I describe. The video contains metaphors, topics, characters, themes, and images, all based upon real, lived experiences of recently successfully credentialed art therapists. The final product and its components offer opportunity for rich discussion about the professional climate and process new art therapists may enter.

CHAPTER 2: CONTEXTUAL EXPOSITION AND REVIEW OF THE LITERATURE

The Professional Developmental Crisis

Those in the process of transition from graduate school to obtaining their professional art therapy credentials may find themselves navigating different domains that overlap and create a professional developmental crisis. The following contextual exposition and review of the literature will discuss the various domains that come together to create this crisis. One such domain is the emerging art therapy graduates themselves. The art therapy graduate not only is entering the workplace, possibly for the first time, but also is entering a specific profession that has its own challenges, which is another domain. A novice counselor can expect to move through a predictable professional developmental process, and so can art therapists. The process of professional development includes professional identity development and professional socialization. To successfully complete this transformation, adaptability is essential.

Developmental Crisis

Crisis is defined as “a time of intense difficulty or danger” when “a difficult or important decision must be made” (Crisis, n.d.-b). A crisis might be an unstable time, an emotionally significant event, or a radical change of status in one’s life “in which a decisive change is impending” (Crisis, n.d.-a). A crisis is a turning point, ending in survival or cessation (Crisis, n.d.-a, n.d.-b).

The concept of a developmental crisis comes from Erickson’s (1963) theory of psychosocial stages in lifespan development. Each predictable stage presents an individual with a developmental conflict, a crisis created by biological, psychological,

and sociocultural dynamics that raises anxiety and must be resolved. For example, identity versus identity diffusion is a developmental crisis that emerges in adolescence when one asks oneself, “who am I?” in relation to individual, family, and social influences, and ideally resolves the conflict with a secure identity and sense of well-being. If the crisis is not resolved and mastered, future development will be affected. Erickson postulated that upon resolution of a series of predictable life stage crises individuals accumulate new ego strengths and integrate them into their personality and inner world. In psychoanalytic theory, the ego is the true self that interacts with the world (Cashdan, 1988); the part of the personality that has the “capacity to unify [one’s] experience and action in an adaptive manner” (Erikson, 1963, p. 16). Development of a strong ego contributes to positive well-being and self-acceptance.

Developmental psychology, a modern study of human personality development and growth, was presented by its leaders with awareness that a person is an emotional and political being, with unique, subjective experiences that shape development (Erikson, 1963; Geoghegan, Pollard, & Kelly, 1963). Psychoanalysis is a predecessor of developmental theory, which is founded on an assumption that universally predictable crises will occur throughout the human lifespan. This notion of normalizing predictable stages in child development has been critiqued by contemporary feminist psychologists, who argue that establishing a dominant norm forces humans with differing experiences and circumstances into being categorized as problematic or deficient (O’Dell, 2015). For example, feminist psychologists argue that gender permeates developmental psychology and issues of culture are excluded from norms. E. Burman (2015) asserted that scrutinizing the limits of developmental psychology is a necessary practice to allow for

the inclusion of critical ideas. E. Burman's feminist theoretical claim integrates the reality that multiple perspectives exist at one time, a postmodern idea (Burt, 2012). Insightfully, Erikson (1963) recognized that his theories were subject to historical systemic influences at the time, and that they inevitably would evolve to include multiple perspectives.

The developmental crisis studied in this paper refers to a period of professional transformation; one that exists for novice art therapists between graduation from training and obtaining their ATR-BC, the professional art therapy credential. "Professional developmental crisis" is a concept that will be explored below in the context of art therapists' professional development, professional requirements, and the current workplace considerations that contribute to create the crisis.

Postmodern Considerations

Uncredentialed art therapists launch into and navigate a multifaceted postmodern world filled with blurred boundaries and creative opportunity (Alter-Muri & Klein, 2011). Postmodernism is "characterized by a knowing irony and a self-conscious, self-reflective, self-referential, self-reflexive quality" (S. Hogan, 2012, p. 70). Postmodernism is the deconstruction and reconstruction of existing ideas and practices, and presents trends that art therapists should consider, including shifts in paradigms used in research such as the inclusion of participatory and arts-based research, reliance on technology for communication and practice, and inclusive, anti-oppressive ideologies (Kapitan, 2014). Postmodern art therapy includes cultural borrowing and awareness of global impacts, regardless of where one lives or practices geographically (Kapitan, 2014; Karkou et al., 2011). These factors are compounded by the task of becoming an art therapist, which presents its own, unique challenges (Kapitan, 2012).

Several authors address the special considerations of the “postmodern art therapist” who is a forerunner to the millennial generation (Brown, 2008; Kapitan & Newhouse, 2000; Karkou et al., 2011; Ungar, 2006). Art therapists must determine how they fit into the context of the postmodern world (Burt, 2012). Kapitan and Newhouse (2000) observed that the new art therapist entering the profession in a postmodern world enters at the “intersection of ‘trust meeting chaos’” (p. 115). New art therapists “expect gainful employment” and “seem to have a deep desire for a living artistic practice, an identity that transcends a fixed version of a career” (Kapitan & Newhouse, 2000, p. 116). Postmodern art therapy allows art therapists to conceptualize themselves as being multifaceted and as having multiple identities, yet new art therapists may not be able to consider larger systems before resolving their professional developmental crisis. Determining how one fits into larger systems, however, is a necessary early step if novices want to fulfill their expectations of being a gainfully employed art therapist.

Professional Identity Development

Professional identity formation is part of the professional developmental crisis. A thorough discussion about art therapist identity formation is a topic of study all its own. Identity itself can be defined in different ways, and is a topic of modern consideration in disciplines including psychology, counseling, and social work (Griffiths, 2013). Development of a common identity is a goal within both the counseling profession (Gibson, Dollarhide, & Moss, 2010) and the art therapy profession (Kapitan, 2014). This section will first report what is known about the professional identity development and normal developmental struggle of counselors and related professionals, and then discuss what is known about art therapists’ professional identity development. New counselors

can expect predictable counselor developmental tasks and themes as they progress as professionals. New art therapists can expect to meet with many similar normal challenges.

Themes of development. Skovholt and Rønnestad (1992) conducted an important study that sought to learn more about the professional counselor and therapist lifespan by interviewing 100 counselors who had varying experience, from students to those with 25 years of post-doctoral experience. Overall, the authors identified that a transition from external to internal authority is present to a major degree in the developmental process of counselors over the career lifespan: New counselors and those in transition depend upon external expertise, whereas experienced counselors rely on internal expertise. External expertise comes from mentors' guidance and the factual knowledge the new counselor learned in training. The closer a new counselor is to graduation, the more the counselor views elders in the field (such as mentors) with admiration and has strong emotional reactions to them. New counselors want to observe these mentors in order to learn models that they can imitate and practice. As novice counselors gain experience, however, they move toward constructing firsthand knowledge. Continuous professional reflection upon personal and professional elements helps the new therapist to integrate personal and professional ideology and values as well as to establish differentiation and individuation among mentors and peers. This process leads individuals to identify as professional practitioners who are autonomous and competent within their profession.

Skovholt and Rønnestad (1992) also found that, in addition to the influence of mentors, multiple factors affect counselor development. These include personal experiences, training, client encounters, and even the process of becoming an experienced

elder in the profession. Social and cultural influences from the micro level (i.e., individual and personal experiences), the meso level (i.e., personal networks such as family and community), and macro level (i.e., the larger system of institutional and governmental impacts) further influence the new counselor's development (Skovholt & Rønnestad, 1992). Personal elements are often normative along the human lifespan, such as the life events of having children or caring for aging parents. A macro level influence, in contrast, might be a law that affects the delivery of mental health services or independent practices.

New counselors assimilate to the profession and accommodate their lives as they learn to practice. Some of these elements are common for professionals and others are unique and shape their development. For example, critical incidents such as a client suicide, personal illness, or a national disaster can cause drastic changes in development along the path of assimilation and accommodation. The counselor may need to work through critical incidents while adjusting to normal developmental changes. Sometimes the critical incident is so challenging that the counselor decides to leave the profession altogether. Other times the critical incident may shape the lifespan of the person's identity and approach as a counselor (Skovholt & Rønnestad, 1992)

New counselors compartmentalize to separate work life from personal life, but over time and through constant professional reflection, their working styles become more congruent with their personality and cognitive schemas (Skovholt & Rønnestad, 1992, p. 510). This means that the counselor moves from separate selves (i.e., work self and personal self) to eventual integration of personality, humor, interests, and therapeutic approach to practice, such as learning how to manage client issues that also may

indirectly have an impact on the counselor. Counselors integrate their belief systems into their professional identity and the meaning of their work. The process of living one's life as an adult, experiencing life, and encountering disappointment and choices creates variability in coping as well as greater understanding. After the new professional undergoes an extensive experience of suffering through the normal developmental struggles of becoming a therapist, a heightened tolerance and acceptance of human variability is produced (Skovholt & Rønnestad, 1992, p. 514). Eventually the counselor no longer suffers or experiences burnout rampantly, and instead begins to learn how to care for the self and cope with the normal challenges of being a therapist.

Skovholt and Rønnestad (1992) reported that pervasive anxiety is present at graduation from counseling training, which lessens as counselors become more experienced. New therapists must work through personal and emotional boundaries; however, this increases their anxiety. Their attempts to learn as much as possible and to be the best therapist they believe they can be can be overwhelming and create burnout. Along with the attempt to be "enough," idealism and narcissism also exist in the new therapist. Before new therapists are comfortable as clinicians, they will go through a series of humiliations over time, which they must navigate and determine which ones are normal failures and which are excessive failures. Failure and fear of failure contribute to beginners' anxiety (Skovholt & Rønnestad, 1992).

New counselors may glamorize the job and desire to be miracle workers with little reality of what "enough" of something such as empathy or skill really is. New counselors often have a faulty belief that they should be able to create amazing results (Skovholt & Rønnestad, 2003). Disillusionment is common because students will go

through a process of discovering real responsibilities and concerns as they transition into practitioners (Orkibi & Bar-nir, 2015). New counselors at first idealize their mentors and, through disillusionment, gradually learn to see them as more realistic and human. Prior to this acceptance, common experiences include blaming mentors or the training program, feeling as if there is too much to know, and blaming one's self for being inadequate (Skovholt & Rønnestad, 2003).

Counselor developmental tasks were identified by Moss, Gibson, and Dollarhide (2014) in a grounded theory study. The researchers facilitated focus groups of counselors, grouped together by the number of years of experience they had in the field. Participants had completed specific developmental tasks over time: idealism to realism, burnout to rejuvenation, and compartmentalization to congruency. The developmental tasks identified by Moss et al. support the themes shared by Skovholt and Rønnestad (1992) and overall movement from external to internal authority. In the study by Moss et al., new counselors transformed through the influence of shared themes that included adjustment to expectations, confidence and freedom, separation versus integration, having an experienced guide, continuous learning, and their work with clients.

Both Skovholt and Rønnestad (1992) and Moss et al. (2014) found that beginning counselors idealized the job and then learned about the reality of the role, which included many duties and roles that extended beyond counseling. Although new counselors may feel frustrated with their work environments, they make discoveries as they progress, learning new skills and information from personal and client experiences. The more they learn, the more realistic they often become about their work (Moss et al., 2014). Moss et al. also discovered that both success and failure were needed to help with the learning

process. Like the themes discovered by Skovholt and Rønnestad (1992), Moss et al. found that it was helpful to normalize the process for new counselors and that the outcomes may be comparable to other helping professions.

Beginning counselors doubted their skills and efficacy and also lacked confidence, which led to burnout (Moss et al., 2014). In order to combat burnout and frustration, beginning counselors report feeling reinforced by working with clients and making small differences in their clients' lives, which give them a sense of success and meaning. New counselors also have reported that they felt surprised to learn that clients are resilient. In fact, beginning counselors have expressed excitement and a sense of comfort that there was a need to constantly learn, change, and self-reflect in order to stay current with information, practice, and theory (Moss et al., 2014). Learning in the form of self-reflection and identity formation is needed, but Moss et al. found that new counselors compartmentalized their newly discovered identities rather than integrating their new knowledge into all domains of their lives. To increase confidence and develop identity, new counselors reported that they learned from and felt comfort from observing their mentors practice.

Professional identity development for counselors. The terms “counselor” and “therapist” are used interchangeably in this section. Development of professional identity is part of the new therapist's struggle (Griffiths, 2013; Moss et al., 2014; Skovholt & Rønnestad, 1992; Studer, 2007). Professional identity development is complex because all of the developmental characteristics and stages create barriers to the development of identity. Complex characteristics influence the successful navigation of this developmental crisis (Levick, 1977; Studer, 2007). Professional identity formation is

necessary for successful navigation of the other developmental struggles a counselor faces, and is a result of successful management and resolution of normal challenges.

According to Moss et al. (2014), professional identity development takes time. These researchers produced an identity development model of the transformational tasks for counselors. Professional development is marked by movement from new counselors' reliance upon external validation from mentors and supports toward reliance on self-validation. This is achieved through professional experiences working with clients and continuously learning. As explained in this paper, new counselors move from having idealized attitudes about professional work toward having realistic attitudes. Counselors' energy moves from burnout early on, when they are new, to feeling rejuvenation later on in their career. The counselor becomes a more integrated person, moving from compartmentalization to congruency of personal and professional life. "As counselors gain awareness of this process, they can be more effective and experience greater job satisfaction" (Moss et al., 2014, p. 11).

Part of the struggle to find one's identity as a professional is a result of the difficulty of understanding roles and expectations, determining theories and approaches, and finding a comfortable fit in a job position (Cashell & Miner, 1983; Feen-Calligan, 2005, 2012a; Griffiths, 2013; Lowndes & Hanley, 2010; Moss et al., 2014; Rehfuss, Gambrell, & Meyer, 2012; Skovholt & Rønnestad, 2003). New therapists search for a harmonious internal fit of theory and a sense of personal meaning in their work (Rønnestad & Skovholt, 2003). There may be a period of time when new counselors go through a painful process of the death of the old identity and rebirth of a new identity as

they determine preferences and values that fit with their internal world within their new professional community (Kottler & Swartz, 2004).

Kottler and Swartz (2004) stated: “The process of acquiring the new identity takes place in the phases of separation, living in the margins and reintegration” (p. 69). Living in the margins is living in a space of disorientation and unfamiliarity, where anxiety and helplessness is present. Being separated from the identity one knew in one’s personal life and fully fitting into the new professional world is part of the process. New counselors may feel a severe sense of alienation at this point. Internal constructs from unresolved issues may become exaggerated in their identity, and they may feel that they do not fit into any of their worlds. There is creative potential in states from which a person emerges and reintegrates with new identity (Kottler & Swartz, 2004). Perhaps this creative potential is where new counselors can experiment with unformed identities in an attempt to fit into new roles (Ibarra et al., 1999), possibly modeling themselves after their idealized mentors (Gibson et al., 2010; Kottler & Swartz, 2004; Moss et al., 2014). Gazzola, De Stefano, Audet, and Theriault (2011) discovered that experimentation with approaches helped to raise self-awareness, and with new awareness the new professional could adjust accordingly. These authors stated that when one has developed a professional identity, one is more authentic with clients.

It is likely that novice therapists believe they need to be ideal therapists in order to overcompensate for strong feelings of insecurity and anxiety (Rønnestad & Skovholt, 2003). With experience and exposure to the work of the therapy profession, the inner and outer worlds of the therapist begin to integrate (Moss et al., 2014). The therapist begins to develop a professional identity that includes likes and dislikes, preferences, abilities, and

values (Ibarra et al., 1999). The new therapist may be fearful of challenging theories (Kottler & Swartz, 2004), but risk-taking and use of their natural self helps with identity formation. Training and work environments must meet the needs of the new counselor to help facilitate identity development (Gazzola et al., 2011). The training program and supervisor or mentor should be a warm, supportive home base where a novice can try on, reject, and challenge theories in practice and professional identities, and be vulnerable (Gazzola et al., 2011; Kottler & Swartz, 2004; Lowndes & Hanley, 2010; Rønnestad & Skovholt, 2003).

Griffiths (2013), who researched the professional identity formation of new youth counselors, discovered that the development and acceptance of the idea of a liminal identity helped new professionals tasked with learning to navigate within multiple fields, manage changing contexts, and assume multiple roles. Perhaps consistently constructing identity helps to manage the changing needs in society and with clients (du Preez & Roos, 1998). Lowndes and Hanley (2010) reported that new professionals who were learning multiple theories and were tasked with creating their own unique integrated approach were able to anchor themselves in the overlaps of several theoretical philosophies of practice. The overlaps of theories helped the new professionals gauge their approaches in relation to other practitioners who ascribed to single theories. These new professionals used their supervision groups to reconnect when they lost track of their personal identity development during the ambiguous environments they worked in. Reframing the burden of discovering identity within ambiguous terrain, Gussak (2015), an art therapist, argued that it may be art therapists' creativity that equips them for the similar task of developing identity within shifting domains.

Professional identity development for art therapists. The above themes from the counseling field may be present in new art therapists' transitions as well. B. Moon (2003) wrote about the beginner's chaos he observed in his own career as an art therapy educator, noting that even learning to navigate the physical space of the campus as well as the mere decision to attend graduate art therapy training are part of the process of becoming an art therapist. After graduation, new art therapists are introduced to many new people and new practices, new professions, new systems, and new roles. Anxiety, struggle, doubt, questioning purpose, confusion, pain, excitement, and insecurity are part of the internal world for the new art therapist (B. Moon, 2003). B. Moon (2003) asserted that the art therapy field is ambiguous, as is the theme of learning the art process. Choices in art such as media, colors, and the images that may emerge make up a "chaotic sea of possibilities" (B. Moon, 2003, p. 32). The experiences may be intense. New art therapists may question the validity of the profession, what clients they want to work with, and the very meaning and purpose of the work to which they are committed.

Art therapists specifically struggle to develop their identity as practitioners in their field (Cashell & Miner, 1983; Elkis-Abuhoff et al., 2010; Feen-Calligan, 2012), possibly because they exist in the liminal space between somewhat more fixed identities of "artist," "therapist," "art therapist," "counselor," and a slew of other potential roles that may be required of them. Feen-Calligan (2012) wrote about the issues of identity for art therapists who are dual-prepared as art therapists and counselors, saying that they struggle to identify with both professions, together and separately. Kapitan (2012) wrote that art therapists' identities are "layered with artist and counselor identities" (p. 148). Collective identity and individual identity both seem to influence the development of

professional identity for helping professionals who straddle multiple roles (Cashell & Miner, 1983; Griffiths, 2013; Junge, 2014; Kapitan, 2010; Lowndes & Hanley, 2010).

Some of the roles art therapists play are reported by leaders and professionals in the field. Art therapists are capable of being primary clinicians (Levick, 1995), may need to complete case management tasks (Riley, 2011), and may need to advocate for themselves and act as their own public relations representative (Bouchard, 1998). Service may be part of the role of the art therapist (Ierardi & Goldberg, 2014), as may research (Slayton, D'Archer, & Kaplan, 2010). Art therapists can work with multiple populations in a variety of ways, and may need to assume a variety of roles within their respective organizations.

Challenges of the New Helping Professional

The struggles and successes that new counselors and therapists encounter overlap with and contribute to the themes and tasks of professional development. Beginning therapists are dependent on other professionals, attempt to apply all knowledge that they have learned, are anxious and insecure, and do not yet have insights on their impact on clients and supervisors. They believe that if they practice and learn as much as possible, they will increase their confidence and lower their anxiety (R. Hogan, 1964). Struggle seems to be inherent in development. In their review of existing literature and empirical data, Skovholt and Rønnestad (2003) found common challenges that novice counselors experience. For example, new counselors who learn a pluralistic framework of theories are challenged by not ascribing to any one theory (Lowndes & Hanley, 2010). Similarly, creative arts therapists struggle as they attempt to define their style of practice between and along multiple axes and practice areas (Feen-Calligan, 2012; Orkibi, 2010; Orkibi &

Bar-nir, 2015). Because art therapists do not learn a single, unifying theory, they are tasked with determining what their individual approaches will be within their workplace contexts.

Ideal Versus Real Imagery

Transition requires emotional and practical adjustment to new demands (Kottler & Swartz, 2004). Baumgardner (1982) explained that college students' abstract images of what a job should be—the idealized image—can be counterproductive. When students transition to the workplace, they can feel a dramatic letdown or disillusionment when the work debunks their fantastical inner image. Disillusionment is about the loss of something (Burridge, 2000), which can be painful and frustrating yet motivate someone to find a stronger sense of self (Halling, 1996). Baumgardner (1982) explained that students obtain their ideal inner imagery from peers, culture's conventional myths about the work, the media, and relatives. The ideal inner imagery can cloud realistic career goals and expectations.

Visualization and action can help someone transition. Roberts (2014) wrote about her success as a nurse who moved from middle to upper management with the use of visualization and a personal professional development plan that she both envisioned with visual and visualized imagery and then literally created. She drew from the very assessment model used by her employer, the Veterans Health Administration, which used the model to assess supervisors' cycles of growth as well as assessing veterans' services to aid in role transition. Roberts strategically visualized and documented her goals using measurable outcomes. She created her professional development plan using eight core leadership competencies: personal mastery, systems thinking, organizational stewardship,

creative thinking, technical skills, interpersonal effectiveness, flexibility, and customer service. She created a sort of treatment plan, like a counselor would for a client, and sought to essentially stabilize several areas within her micro systems (individual, internal, personal) and meso systems (social, relationships, networks). For example, she made personal banking and investment arrangements before she transferred to a new position in a new geographical area. She also secured professional organizational membership in her new town so that she would have a supportive network. With non-job details planned for, and with realistic action steps and visualization designed within a familiar model, she was able to focus on her new work without the abrupt transition in multiple areas of her life at once. Thus, internal images can be either counterproductive or helpful in the real experience of transition to work, and may be of use to the mentor and the one in transition alike.

Anxiety and Insecurity

New counselors may feel insecure because they have not yet developed a secure sense of practitioner self-identity (R. Hogan, 1964; Skovholt & Rønnestad, 2003). Like an adolescent, the new counselor has mood swings between a broad range of positive and negative emotions, and takes negative feedback poorly (R. Hogan, 1964). Levick (1977) also likened recently graduated art therapists to Erickson's adolescent stage of development, described as "sense of identity versus identity diffusion" (as cited in Levick, 1977, p. 4). She described creative arts therapists' swing from overconfidence to insecurity when reacting with drastic mood changes. Compared to the new counselor who is older and has experience in a related field, a younger person typically reacts more intensely (Skovholt & Rønnestad, 2003).

Ambiguity and uncertainty can be related directly to anxiety and insecurity for the new counselor (Lowndes & Hanley, 2010). In her study, Griffiths (2013) found that Christian youth counselors reported strong anxiety and uncertainty in their first placement after graduation as a result of a tension that existed between faith and professionalism, and the efforts to fit a liminal process into the context of the workplace. Griffiths identified that the Christian youth workers' work was a liminal process, a constantly multifaceted approach that they performed between fixed points. Art therapists' work also requires multifaceted approaches and is often performed in a space of blurred boundaries, between fixed points (Alter-Muri & Klein, 2011; Kapitan & Newhouse, 2000). An art therapy student participant in Elkis-Abuhoff et al.'s (2010) study reported feeling intensely anxious as she entered into her first placement with clients as a result of the uncertainty with which she viewed her clients. Gussak and Orr's (2005) study revealed the anxiety students feel around the uncertainty after graduation, during the transition from student to entry into the workplace.

Ambiguity and Role Confusion

According to Skovholt and Rønnestad (2003), new therapists also struggle with the ambiguity of human problems as well as the various professional roles that are required to perform the job. In a study conducted by Lowndes and Hanley (2010), participants reported that they struggled with becoming integrated therapists because they had to "navigat[e] murky waters" (p. 167). Overall, tolerance for ambiguity was necessary for new integrated counselors because they were required to learn multiple approaches and theories of therapeutic practice and be able to appreciate and utilize the ambiguous tensions among those practices (Lowndes & Hanley, 2010). The ambiguity in

training and the workplace created a challenge to identify, which participants described as “navigating their way through their training without a clear theoretical guide and encountering numerous hurdles . . . struggl[ing] to find firm ground . . . and maintain[ing] the autonomy and flexibility of integration” of theories to practice (Lowndes & Hanley, 2010, p. 169). The participants found structure where theories connected, which reportedly helped them to navigate ambiguity.

The Christian youth counselors tasked with navigating overlaps in spirituality, religion, practice, theory, and organizational culture in Griffiths’s (2013) study found that transitioning from volunteer to employee concurrently with the transition from student to professional resulted in tension from the ambiguity. As interns they were volunteers, whereas once they were employees they were tasked with putting theory into practice and developing professional identities. Participants in Griffiths’s study reported feeling as though they could not describe what a Christian youth worker was as they navigated an occupation that fell between faith and secular systems. The process of socialization that helped to establish professionalism was ambiguous as well. They reported feeling as if they were constantly navigating liminal space, with external pressures from their clients’ parents and the systems within which they worked, as well as inner conflict about themselves.

Role confusion and ambiguity from internal and external sources also challenge art therapists. In an older account, Cashell and Miner (1983) described creative arts therapists, new to practice or otherwise, who struggled with ambiguity as a result of the multiple roles they filled and felt that employers did not understand their roles as creative arts therapists. Levick (1995) reflected in her writing about earlier generations of art

therapists who at the time may have felt frustration because of the ambiguity of being trained as primary therapists, which offered the promise of becoming peers with psychiatrists in the beginning, and then later being viewed as having adjunct, supportive service roles. Feen-Calligan (2012) interviewed graduates of art therapy programs and art therapy programs with dual training in counseling and compared the two groups of students' perceptions of professional identities. She reported that new art therapists and dual-trained art therapists felt role confusion and that mutual ambiguity existed in their organizations, echoing the descriptions of Cashell and Miner (1983). Many of the participants in Feen-Calligan's study could not find employment in which the job title was "art therapist," so instead accepted related positions such as "counselor" which challenged their understanding of their roles.

Boundaries

Unclear and developing boundaries help to create the ambiguity and role confusion that new professionals experience. New counselors are faced with learning how to manage the boundaries of their various roles (Griffiths, 2013; Moss et al., 2014; Rønnestad & Skovholt, 2003; Skovholt & Rønnestad, 1992). The struggle to find a comfortable theoretical fit impedes new counselors from confidently asserting themselves to define the role they are in. Role confusion, and therefore maintaining boundaries for the role, is very challenging for a new counselor, especially one who is working within multiple ideologies, theories, and professional settings (Griffiths, 2013; Lowndes & Hanley, 2010). Art therapists can expect to experience confusing boundaries (Alter-Muri & Klein, 2011; Cashell & Miner, 1983; B. Moon, 2003). An art therapist can experience discomfort when setting boundaries for clients, fearing that client expression will

somehow be restricted (Schreibman & Chilton, 2012). Whether new or not, art therapists may continue to experience unclear roles and expectations (Cashell & Miner, 1983), possibly creating job dissatisfaction.

In addition to defining the boundaries of practice within ambiguous terrain, new professionals' management of emotional boundaries is difficult and boundaries can be too loose or too closed off (Skovholt & Rønnestad, 2003). New therapists may emotionally close off if they are overwhelmed, preventing them from staying present with clients' emotional needs, or they may struggle to close off and feel disturbed over and over again (Moss et al., 2014). Taxing new counselors' emotional boundaries is the cycle of attaching, participating, and then terminating with clients repeatedly. Several studies in the 1980s reported high burnout of new counselors because of their difficulty with boundary regulation (as cited in Skovholt & Rønnestad, 2003). Flexible and adaptive boundaries are needed, which the new counselor does not have because it takes time to develop the ability to be both empathic and to care for one's self within the therapeutic relationship (Skovholt & Rønnestad, 2003).

Application of Theory Into Practice

Putting theory into practice challenges new counselors. They may need to make decisions in real and serious situations while experiencing confusion or feeling that they don't know what they are doing. New counselors may feel seduced by singular, well-accepted theories because they seem to make sense and offer a sense of security (Lowndes & Hanley, 2010). Creative arts therapists specifically may feel inadequate, insecure, and marginalized if they compare themselves to people in helping professions that are more established and regulated (Orkibi & Bar-nir, 2015).

Counselors who work to integrate theories of practice report feeling as if they are supposed to determine with what to “fill the empty cup” of theory that they were given in training (Lowndes & Hanley, 2010, p. 167). Counselors, like art therapists, can be tasked with developing their personal theoretical frameworks by drawing from existing theories and skilled approaches. When translating theory into practice, counselors can struggle with tailored application because it can feel like risk-taking natured treatment. Tailored application in treatment is when a clinician takes into consideration the client’s individual needs and then applies certain theory and practice to specifically meet those needs. Counselors are placed in positions of risk-taking because they essentially create the treatment approach as they go along. Counselors must consolidate theories they ascribe to and encounter into individualized styles (Lowndes & Hanley, 2010).

Art therapists are faced with a similar task of learning to consolidate self-ascribed treatment approaches. They are required to take separate graduate courses in both the theories and practice of art therapy and the history and practice of counseling theories (American Art Therapy Association, 2007). “Becoming an art therapist involves the development of one’s own therapeutic style. This is a process as individual as one’s own art products. This is not an easy process” (B. Moon, 2003, p. 29).

Disillusionment

Skovholt and Rønnestad (2003) discovered from reviewing several studies about therapists’ development that disillusionment should be expected, yet disillusionment usually comes as a surprise to novice therapists. The experience is a painful process of becoming aware of the reality of what was once idealized (Rønnestad & Skovholt, 2003) and can leave one grieving the loss of the ideal (Kapitan, 2003). Kapitan (2003)

poetically described disillusionment as, “The thunderbolt of consciousness shatters illusion and awakens us to find our place in this alive landscape,” (p. 56). The awakening can be disappointing, scary, or shocking, or a blend of many emotions when someone learns what is really there.

Halling (1996) stated clearly:

Disillusionment throws people into a crisis and forces them to find their own way of making sense out of their lives, to see things with their own eyes. No longer can one follow the path that an idealized other provides, but instead one has to forge out, painfully and actively, one’s own direction. Self-examination is an important aspect of this process and new and typically unwelcome questions arise about things that were previously naively taken for granted. But this introspective turn is by no means a matter of turning away from others, especially not for those who do confront their own disappointment and are willing to ask hard questions. There is a seeking out of others for validation, consolation, and interpretation, but with a keen awareness of the limits to the extent to which another can help. In a word, there is a sharper recognition of the separateness of self and other. (p. 187)

Novices at first glamorize and idealize the helping profession and the impact that they will make with clients, and idealize supervisors and masters in the field. When reality begins to come into focus from experiencing the work and professional transformation, developing counselors first try to validate their training. When they experience disillusionment related to their training, it leads them to intensely explore the professional landscape to try and find answers and fill in the gaps (Rønnestad & Skovholt, 2003; Skovholt & Rønnestad, 2003), which is a good thing. During this time,

they may intensely critique the counseling training program, but learn from what they find in the professional landscape. The reality is that a training program cannot possibly prepare graduates for the entirety of the considerable experiences they will have doing the work.

Mentors are a necessary support who help developing therapists through the process of disillusionment. Mentors are the primary professional support and ideally provide a safe space for vulnerable exploration. The surprise of disillusionment leads to blame and reflection on the gaps in the humanness and shortcomings of the mentor and the inadequacies of the training (Hogan, 1964). Disillusionment is an unavoidable part of the process of becoming more confident; shifts can be expected from internal to external focus and back again while the novice sheds internalized ideals and accepts reality (Rønnestad & Skovholt, 2003). The mentor needs to understand disillusionment in order to support the novice, and the novice needs to understand the importance of the mentor.

According to Winnicott (1953), the process of disillusionment is healthy and universal in child developmental theory. In Winnicott's theory, sufficient time is needed with the illusion (that which is idealized) before the individual has to face disillusionment, because the illusion provides pleasure and security. This theory of course originally refers to the early mother and child relationship when an infant loses the illusion of being one with the mother and able to control everything in the environment. The "good enough mother" helps the process of separation and disillusionment by adapting to the child's needs, reducing how much she responds to and provides every need immediately and abjectly—thus, first supporting the infant's illusion and then gradually removing the illusion (Winnicott, 1953). The child may be frustrated with the

lesson that realistically whatever is needed or imagined in the moment cannot be magically manifested; he or she may, for example feel frustrated at having to learn to wait to be fed. Although it creates strain on the individual, much can be learned from adapting to the frustration that comes with disillusionment, including patience and acceptance. Winnicott believed that the individual cannot make the transition from the ideal to the real without a good enough mother.

New counselors also must make the transition from the ideal to the real, but what object will be the “good enough mother” (Winnicott, 1953)? At first the individual’s judgment of the subject—for example, the work of the counselor—is clouded by an idealized transference, perhaps over-identifying with whatever the idealized subject was (Halling, 1996). The mentor or the profession may stand in as idealized subjects, and in some ways mirror the mother–child relationship because the developing counselor is so dependent on external reinforcement (Rønnestad & Skovholt, 2003). The developing therapist may project an idealized self-identity onto the mentor, the workplace, or the profession, but needs to learn to experience the self as separate from the mentor/subject (Cashdan, 1988). The mentor may take a position like the “good enough mother,” adapting supervision to the developing therapist’s needs as R. Hogan (1964) suggested in his model of developmental supervision, described earlier.

As the novice counselor gains experience and struggles with the conflict of dependency and autonomy, the mentor adapts to the supervisee’s needs and clarifies ambivalence. Adjustments are made by the mentor as the novice develops. The mentor of course is not the source of the developing therapist’s illusion, nor can the mentor create an illusion. Coincidentally, the humanness of the mentor, the natural limits to how much

the mentor adapts, are helpful. The natural limits of the mentor can provide the developing therapist with an opportunity to accommodate and begin to understand useful, natural, meaningful realities as an autonomous practitioner (Summers, 1999).

Mentors can support through disillusionment at first by taking a teaching approach for dependent supervisees. For example, supervisors share what they would do in certain situations in order to model, direct, and teach, and validate insecure novices. But it is not just the mentor who is implicated in the disillusionment of the new practitioner. A professional may look to the employer or organization to fulfill the needs of being nurtured and fed professionally and emotionally (Kapitan, 2003); nevertheless, nurturing a professional is not the role of an organization or an employer. When the new professional projects identity onto the object (e.g., as dependency, power, or ingratiation) in the search for the caretaking object, they likely will fail in eliciting the desired interpersonal response (Cashdan, 1988). Professionals may look for someone or something to blame for not having their needs met, which is a natural response to disillusionment (Halling, 1996). They may blame their work, their profession, their mentor, and/or themselves. The process of becoming disillusioned from the ideal to real positions the new professional as having to wrestle with viewing objects that do not fulfill their needs in a balance of good or bad (Cashdan, 1988).

Art therapists also can feel resentment when they are pulled away from their creative work to tend to other job demands and tasks, which is sometimes out of their control (Kapitan, 2003). Art therapists launch into the profession with ideal preconceptions of how they plan to use art in their practice and how impactful they will be with their clients (B. Moon, 2003). An art therapist merges the inner certainties of

their desire to be an art therapist with their idealized images of what the work will be, and untangling them can be confusing. Perhaps in the process of untangling inner truths and ideals, the art therapist's disillusionment causes them to devalue all that was once important—the art therapy profession, art, mentors, and jobs—and only later connecting what is real in the world to what is real internally. This process would be akin to redressing the goodness-badness balance in their inner world (Cashdan, 1988). Kapitan (2003) recommended facing and entering one's disillusionment to find their way out. To move beyond mere balance and to instead engage in transformation, Kapitan advised finding connection to the genuine vitality of one's life and work of art therapy, which may serve to ground one in the constantly changing world and therefore to not get lost and lose what is important.

Transition to the Workplace

Moving successfully along the path from graduation to credentialing includes entry into the workplace and entry into a larger system of the helping professions. To procure post-education hours, new art therapists need to find employment where they can provide art therapy directly to clients. New art therapists will be new employees, and organizations are part of the workplace ecosystem art therapists may need to learn to survive and adapt to as they transition to becoming credentialed professionals. Literature from the career and organizational psychology professions as well as from higher education provides insight into this journey, as does literature regarding roles for new employees, for organizational entry, and for new counselors.

High newcomer employee turnover in organizations can be expected (Louis, 1980; Nifadkar & Bauer, 2015), particularly for those transitioning from college to the

workplace (Halstead, 2014) and for those in helping positions such as counseling, creative arts therapies, and teaching (Cashell & Miner, 1983; Cuddapah & Clayton, 2011; DeAngelis & Presley, 2011; Osborn, 2004). Turnover often occurs because employees do not know what to expect and set up unrealistic expectations for themselves, leading to adjustment problems and low job satisfaction (Louis, 1980; Wanous, Poland, Premack, & Davis, 1992). When expectations are unmet, disappointment and disillusionment occurs and the newcomer may experience something of a “broken promise” effect (Louis, 1980, p. 228).

There is a high pressure to perform from a newcomer’s external and individual internal sources, which can lead to anxiety and a feeling of vulnerability and even competition (Nifadkar & Bauer, 2015). Novice counselors developmentally could be struggling simultaneously with anxiety, depression, unrealistic perceptions of the work of counseling, and unrealistic expectations of how “good” they are as a counselor (Moss et al., 2014; Rønnestad & Skovholt, 2003; Skovholt & Rønnestad, 1992, 2003; Teixeira, 2014). Halstead (2014) found that graduates 29 years old and younger who were transitioning from college to the workforce felt that more life experience may help the newcomer better cope with these realities and symptoms. Moss et al. (2014) identified age, experience, and being in a more advanced developmental life stage as features of the novice therapist that could lessen the level of disillusionment and increase tolerance for discomfort. These findings suggest that age and experience are an advantage for the new therapist.

Beginning counselors idealize the role of “counselor” (Moss et al., 2014) and may be developmentally in the lifespan stage of identity versus identity confusion (Erikson,

1968). During this developmental stage, individuals grapple with the task of making meaning out of their work and life, and either accept or reject the roles that they assume. New counselors entering the workplace must adapt to changing situations in the workplace while gaining an understanding of the reality of their role as a counselor (Studer, 2007). Additionally, those new to an organizational position will need to conceptualize and clarify their roles as employees, including understanding the tasks, responsibilities, and social relationships of the roles (Levin, 2010). Developing boundaries is one of the normal developmental tasks and struggles of the new therapist (Moss et al., 2014; Rønnestad & Skovholt, 2003; Skovholt & Rønnestad, 1992, 2003), who, in addition, must develop job role boundaries in the organization. Recent graduates new to the workplace experience many changes, including a change in role in multiple domains of their lives, for example, assuming the role of having a master's degree and perhaps relocation. Defining one's role is a major task for a newcomer and a new therapist, and may impact the success or failure of the individual professionally (Moss et al., 2014; Nifadkar & Bauer, 2015; Studer, 2007).

According to Griffiths (2013), when the helping occupation is ambiguous and the structure of the roles are loose, an individual must develop a multifaceted professional identity that is adaptable. Navigating and transforming through the liminal space between student and professional to understand new status is confusing, and new helping professionals need to come to terms with being called a professional as well as feeling like a professional. Being a member of a group of like-minded people helps to create anchor points and supports novices during the transition to becoming a professional and

assuming a role in the workplace (Cashell & Miner, 1983; Cuddapah & Clayton, 2011; du Preez & Roos, 1998; Griffiths, 2013; Lowndes & Hanley, 2010).

Challenges of the New Art Therapist

This section includes information about the specific challenges that impact the success of the new art therapist. The new art therapist has requirements that they must follow to obtain their credentials. A new art therapist is a new graduate of their training program, launching into the world as a new professional. In order to complete the requirements of their credentials, they must find employment and enter into organizations.

ATR-BC Requirements

Understanding the requirements that dictate eligibility for professional art therapy registration and board certification, the ATR-BC credential, is essential to explain the predictable achievements a new art therapist may seek. These requirements establish a framework for the new art therapist's period of professional developmental crisis.

First, the entry level into the art therapy profession is a master's degree. After graduation, if art therapists choose to work toward credentialing, they must obtain 1,000 hours of post-education direct client contact using art therapy and 100 supervised hours with a qualified supervisor in order to apply and be eligible for their art therapy registration (Art Therapy Credentials Board [ATCB], n. d.). This requirement is specific to graduates of programs approved by the American Art Therapy Association (AATA). Other requirements exist for a variety of different scenarios and individuals may navigate the requirements and submit supplemental documentation to the ATCB (2016). Once one is awarded one's registration (ATR), one may sit for the ATCB Examination, which is

endorsed by the National Board of Certified Counselors, and become a fully credentialed board certified art therapist (ATR-BC) upon passing.

The path toward credentialing requires money and time, most likely taking at least 2 years. Art therapists must work in a setting where they can procure the required number of post-education professional hours. They also must identify a qualified supervisor and complete the required supervision hours. Such a supervisor may or may not be available within their place of employment, and if not, art therapists may have to pay a fee. Art therapists will transform as they make the journey through a variety of conditions and experiences, professional and personal. Navigation of these “clear” requirements is the chaos and the maze that B. Moon (2003) and Malchiodi (2004) refer to, respectively.

Launching Graduates

Graduation from master’s level training marks the new professional art therapist’s launch into the professional workplace. There are certain emerging graduate qualities to consider as well as economic and societal conditions that shape the environment into which the new professional enters. New graduates will find themselves making serious decisions in order to maintain a work-life balance and to achieve professional goals to advance in the field.

The decision to become an art therapist and attend graduate school in the first place may have been a serious life decision and personal investment for the new art therapy professional. Graduate training in any discipline is necessary to stand out among educated peers (Greenleaf, 2014), but for art therapists specifically, graduate training prepares them for entry level positions. Student loan default, an issue beyond the scope of this paper, is of national concern in the United States, and many who seek postsecondary

education, such as graduate art therapy training, rely heavily on student loans to finance their goals (Hillman, 2014). New graduate art therapists, then, may be in debt from specialized training that distinguishes them among highly educated peers in professional roles, yet qualifies them for lower paying, entry-level positions in the workplace.

New art therapists likely must pay for their education soon after graduation, and a lack of funds could prevent them from being able to actually pursue their desired art therapy career (Orkibi, 2010). Art therapists may have to accept non-art therapy positions as a means to professional or financial goals, depending on their circumstances and professional plans. College itself does not guarantee a good job—or any job:

No one may be willing to pay you for work you find personally meaningful. The pursuit of money and job security may sacrifice meaning and job satisfaction.

Students must make some hard decisions in the face of both personal and environmental uncertainty. (Baumgardner, 1982, p. 214)

Compromise for the sake of survival may feel like a barrier to the new art therapist, but the ability to compromise might also demonstrate effective strategy and resilience.

New art therapy graduates typically are individuals in their mid to late 20s and may have never worked in professional roles with clients directly before (Elkis-Abuhoff, Gaydos, Rose, & Goldblatt, 2010; Malchiodi, 2004). Today these graduating job seekers, entering as new members of the art therapy profession with a mean age of 24.7 years old (Elkis-Abuhoff et al., 2010) also may be post-recession job seekers from the millennial generation. The millennial generation, born between 1980 and 1994, is characterized as being quick to integrate new technologies into their lives (Crappell, 2012), such as social media and online job banks. The millennial, post-recession job seeker also may question the value of a college degree in the first place, and therefore focus on immediate job satisfaction rather than attempt to rely on the financial payoff of the investment of college (Cardon, 2014; Greenleaf, 2014).

The mean age of graduating art therapists lies within the age of what Bonovitz (2017) argued is a unique, separate developmental crisis of young adulthood, age 22 to 28 years old. During this crisis, young adults develop their career paths and ethical belief systems, and new social constructs replace familial system patterns, which recede into the distance. Young adults become more acutely aware of their aging and their responsibilities. Self-appraisal as a result of interactions with the world are characteristic of this age period (Bonovitz, 2017).

Other art therapy graduates may be embarking on a second career when they begin their job search, with their initial entry into the general workplace having happened many years prior. They may be generationally and developmentally in a different life stage and their survival strategies could be different, and possibly more sophisticated. Second-career graduates might approach the task of working toward credentialing with

clearer intention for the applications of skills and theory (Oppegard, Elkins, Abbenante, & Bangle, 2005). Perhaps second-career art therapy graduates enter the art therapy profession experienced with previous opportunities for development of ego strength, as it is unlikely that they are still in the period of young adult development.

Digital Job Searching

The use of social media and reliance upon the Internet for information is part of contemporary society. Young adult job seekers are informed and connected. Cardon (2014) stated that technology and social networking as a medium is “the water they swim in and don’t see” (p. 35), when discussing current students who are members of the millennial generation. The current occupational climate is marked by intensive job search behavior that Vuolo, Staff, and Mortimer (2011) call “job shopping” (p. 1761). Job seekers scour the Internet looking for a position that fits their skills sets and personalities and other criteria such as salary and benefits. The current workplace climate includes difficulty finding jobs that require 4-year degrees, as new jobs are mostly in low-skilled service or health care (Greenleaf, 2014). Art therapy is categorized as a health-care occupation, and entry-level positions require more than 4-year degrees, possibly propelling interested students into the decision to embark on graduate training.

Job strategies from over 10 years ago in a climate where art therapy job opportunities were scarce are still relevant for contemporary new art therapy job seekers who are searching for employment. Malchiodi (2004) wrote, “An art therapy job seeker does not generally find ‘art therapist wanted’ in job banks, and many employers do not have the ability to offer or create a position called ‘art therapist’” (p. 30). There might be more art therapy jobs available now than when Malchiodi’s article was published, but art

therapists may still need to know what to look for and how to read the results from job search engines. Brand new art therapists may in fact need to be able to determine how art therapy fits into a larger context, as Burt (2012) suggested. Understanding art therapy in a larger context may help the job seeker envision being an art therapist in positions not distinctly posted as art therapy openings. This suggests that new art therapists need to develop an understanding of both the profession within a larger systemic context and also how they uniquely fit in the profession.

New job seekers may encounter frustration if they rely on employers to create and post “the perfect job.” If new art therapists search for art therapy as an “occupation,” encumbered with certain boxed-in constructs and potentially misrepresented musings online, this could impact their success (Junge, 2014). In 2005, Gussak and Orr addressed the ethical responsibility of teaching certain skills in order to adequately prepare art therapists in training for the real world so that they can be successful in finding work. These authors shared the effectiveness of a course Gussak designed for his students. Gussak asked students to perform job searches, write resumes and cover letters, and role-play mock interviews for positions that did not specifically ask for art therapists. Students learned to navigate the map-less terrain and advocate for themselves for employment, as well as advocate for art therapy within the circumstances (Gussak & Orr, 2005). Perhaps understanding how new art therapists interface with the job market can help educators prepare them for this technical aspect of the launch.

Multiple Workplace Roles

Art therapists take on many roles that can lead to confusion for art therapists and for colleagues and coworkers (Cashell & Miner, 1983; Feen-Calligan, 2005; Gussak,

2015; Kapitan, 2010; Orkibi & Bar-nir, 2015). Art therapists are tasked with defining their roles as art therapists individually, as well as within organizations, and, if they are newcomers to the workplace, need to additionally navigate the newcomer experiences. According to Cashell and Miner (1983), job duties for the seasoned art therapist exceed the scope of therapy; some reported that they cooked, exercised, or led craft groups and recreation activities. Even treatment expectations were not clear, as creative arts therapists did not always know if participation in arts therapies was mandatory for their clients or not. Job stress, common in creative art therapies because of inconsistencies in the professions, impacted Cashell and Miner's study of participants' personal, professional, and organizational lives.

The current economy has been one of downturn, leading to funding cuts and layoffs. This may position employees, including therapists and art therapists, to be required to fulfill more roles as organizations restructure (Levin, 2010). Levin (2010) noted that managers can be repositioned to fulfill different roles and even multiple roles at once as organizations adjust to operate with fewer resources. Little time to adjust threatens the successful transition and pressures even seasoned leaders to function in new roles very quickly. Taking on a new role in the workplace is a challenging and stressful life event, ranked as being even more challenging than the onset of health related problems and almost as challenging as divorce (Levin, 2010). Both externally and internally hired managers have reported that 90 days is the minimum time it takes to adjust to a new role, and 6 months is the minimum to feel confident in the role (Levin, 2010). Those who do not adjust are either pushed out or quit. For the creative arts therapist, a leadership role may become one of the many roles to which they must adjust because

educating peers, administrators, and supervisors is necessary if they want to reduce isolation, a contributing factor to job dissatisfaction (Cashell & Miner, 1983).

Success Factors for the New Helping Professional

Although there is a plethora of challenges that new helping professionals face, there are also a number of things that can make success more likely. This section includes how mentors and supports are helpful for the new professional. Utilizing imagery and metaphor are techniques for new professionals' transitions and is included in this section. And finally, other factors that can impact the new professional's success is professional socialization into both their professional at large and into workplace organizations, and finding work that has purpose and meaning.

Mentorship and Supervision

New practitioners turn to mentors post-graduation to supervise post-education hours in counseling and art therapy. Several authors have stated that mentors and external supports are of key importance for the new professional in navigating the tasks and challenges of counselor development. Mentors provide teaching, guidance, and the challenge to move toward autonomy (R. Hogan, 1964), and are essential for reassurance, reinforcement, and modeling (Rønnestad & Skovholt, 2003; Skovholt & Rønnestad, 1992, 2003). Mentors help new counselors work through issues related to clients and role confusion (Sommer, Ward, & Scofield, 2010) and help new art therapists to expand their ability to manage issues (Kapitan, 2012). Mentors help novices with professional identity formation (Feen-Calligan, 2012; Lowndes & Hanley, 2010; Vondracek, 2001), as does maintaining connection with like-minded peer supports (Cashell & Miner, 1983; Cuddapah & Clayton, 2011; Fritschler, 2013; Orkibi & Bar-nir, 2015).

New counselors' external dependence reinforces the necessity of a supportive and positive mentor or supervisor as a guide through the initial and early years of practice (Skovholt & Rønnestad, 1992). "While it is the student who will do most of the work, success cannot be attained without a deep and honest relationship with a supervisor" (B. Moon, 2003, p. 45). Without a mentor the new counselor is left to navigate the ambiguity and troubles of working and becoming a counselor, as if "searching for one's way on the high seas without experience" (Skovholt & Rønnestad, 2003, p. 55). All levels of counselors may feel as though the supervisor or mentor is important (Moss et al., 2014), and supervisors best support supervisees by adjusting their approach to supervision to meet therapists' developmental needs (R. Hogan, 1964; Thomas, 2010). The supervising mentor would do best to maintain a consistent presence while a new art therapist gains independence (Elkis-Abuhoff et al., 2010) during the transition toward becoming a professional.

A newer therapist with some experience continues to experience inner conflict between dependency and autonomy, going back and forth from feeling overly confident to overwhelmed again as the novice "reflect[s] on the growing pains of the journeyman" (R. Hogan, 1964, p. 140). Supervisors best serve supervisees by teaching and being supportive, and encouraging new therapists to try things their own way (R. Hogan, 1964). A drastic increase in stress and anxiety occurs for the novice who is engaging in client experiences for the first time, and the supervisor acts as a "safety net" (Elkis-Abuhoff et al., 2010). The mentor is important for helping the novice through the anxiety, ambiguity, and isolation (Lowndes & Hanley, 2010). As the novice moves from idealism to realism, the mentor creates a framework within which the new counselor is able to experience and

navigate the impending and necessary process of disillusionment (Skovholt & Rønnestad, 2003), described specifically in the context of supervision later in this paper. Beginning counselors often want to know that their mentors have been through similar experiences and seek ideas, advice, and support (Moss et al., 2014). “It is, after all, the student who is embarking on the heroic quest; the mentor has been this way before” (B. Moon, 2003, p. 45).

According to Skovholt and Rønnestad’s (1992) study, supervision can help by providing optimistic realism that floods idealism as well as normalizes the struggles and the slowness of the developmental process toward integration. Supervisors and mentors must know that the themes of new therapists can reappear again and again because development continues long after graduation. This fact may help guide them, knowing the anxiety will lessen as the new counselor gains experience. Knowing that senior therapists have reported that their interpersonal interactions were more important than data, research studies, and literature in their overall learning may help new therapists make sense of their unique and common process.

For some new professionals who are tasked with navigating dual identities, such as art therapists with dual training, supervision is a positive experience. For others, their supervisors may know little about certain models, have training in completely different approaches or disciplines, creating “disharmony with personal philosophies” (Lowndes & Hanley, 2010, p. 168). For this reason, art therapists benefit from having mentors who are strongly rooted in their professional identity (Feen-Calligan, 2012). A strong supervisory relationship seems to be the most important aspect of supervision for art therapists (Elkis-Abuhoff et al., 2010; Feen-Calligan, 2012). Supervision supports the novice’s learning

and provides guidance and knowledge as individuals in training or early in development become the next generation of art therapists.

The supervisor supports the art therapist in trying on identity during the training process (Elkis-Abuhoff et al., 2010). Post-master's supervision could provide this relationship; the anchor within the ambiguity and confusion. When novices need external support and modeling because they are so dependent at first and there are so many variables they may encounter, successful transition to earning their ATR-BC may require an art therapist supervisor. The Art Therapy Credentials Board application for the ATR, however, lists that other supervisors will be accepted from related mental health fields including social work, family therapy, and psychology (ATCB, 2016). The transition requires the novice art therapist to learn to simultaneously differentiate and adapt—as Riley (2011) stated, be different and the same.

New counselors need this external support and reinforcement not only from their mentors, but also from their peers and clients to reassure and help with building confidence (Moss et al., 2014). Being a member of and attending supportive, like-minded groups benefits new counselors because they reduce isolation and normalize the struggles (Cashell & Miner, 1983; Cuddapah & Clayton, 2011; Lowndes & Hanley, 2010; Moss et al., 2014; Orkibi & Bar-nir, 2015). Professional membership not only connects professionals to one another to create a support system, but also it increases collective numbers, which may aid in professional identity formation (Junge, 2014). Collective self-esteem, the self-esteem of being part of a group, impacts practitioners' satisfaction and well-being (Orkibi & Bar-nir, 2015). Being a member of a like-minded peer group offers the opportunity to share ideas and resources and discuss roles and identity, and it can

offer multidimensional support in addition to supervision for the new art therapist in transition (Cuddapah & Clayton, 2011).

The American Art Therapy Association has a mentor relationship program through the professional organization (AATA, 2016), whereby professional board certified art therapists volunteer as mentors and new professionals sign up. Certain written resources are available to students online on the AATA website as well. Do new art therapists navigating the transition to becoming a professional within what B. Moon calls “beginner’s chaos” (2003, p. 30) turn to written works for support and reinforcement? When the goal of professional networks and like-minded supports is to reduce isolation, online resources may or may not provide the necessary professional socialization and confidence that new and transitioning art therapists need. Art therapists are expressive and the work of art therapy involves art and interpersonal relationships. Perhaps the external support along the transitional path toward credentialing needs to appeal to the new art therapist. This knowledge may help art therapists guide newcomers more successfully.

Imagery and Metaphor in Supervision

Imagery, both visual and visualized, can be a useful tool for mentors to use as the individual in transition moves through the professional developmental crisis. Metaphor offers the opportunity for reflection to help understand the process of becoming a helper and to develop an internal sense of direction, as well as communicating relatable experiences (Sommer et al., 2010). Metaphors are included in many helping professions’ literature, including that of counseling and art therapy, to explain experiences. Kapitan (2012) described the art therapy profession as a “room” with which a student or new

professional needs to become familiar, a relatable experience the new art therapist can imagine in order to make sense of entering the profession. Skovholt and Rønnestad (2003) referred to the new therapist as an “adolescent” (p. 50), as did Levick (1977), a relatable psychosocial developmental stage that mentors can use to imagine and compare developmental needs such as the emotional fluctuations and expanding perspectives of new counselors and art therapists. R. Hogan (1964) called the new counselor’s development a “journey” (p. 140), and without the “safety net” (Elkis-Abuhoff et al., 2010, p. 125) of a new mentor, a new counselor is stuck “searching for one’s way on the high seas without experience” (Skovholt & Rønnestad, 2003, p. 55).

Counselor educators du Preez and Roos (1998) conducted a qualitative research study that used visualization in the form of metaphor and visual art making with a group of 54 counseling supervisees in South Africa who were new to counseling and very near to graduation and the launch of their careers. The use of imagery and metaphor in this study created stronger peer support, in addition to their regular supervision, because participants were able to experience, see, and identify with their struggles as successes as well as those of their peers (du Preez & Roos, 1998).

In a quantitative and qualitative study of 19 art therapy students in clinical placements, Fish (2008) found that art making in supervision led to deeper peer connections and shared, relatable experiences, as well as clarity when supervision was not being effective. Fish asked art therapists in training to respond to issues of supervision in art making using “response art” in which art therapists “contain, explore, and express clinical work” using “focused attention . . . [on] sensations, emotions, perceptions, and tacit knowledge” (2008, p. 70). For example, one participant drew

herself as an alien on a balance board in response to working with troubled children. Through her visual art imagery and verbal description of the metaphor the supervisee expressed how she felt out of place and different from her clients, but was finding balance in her role. Fish herself made and shared response art that had helped her to manage and communicate with her supervisees how she experienced the group and their processes. One art therapist supervisee stated, “I was able to really access how I felt about something or someone” (Fish, 2008, p. 74). Another supervisee reported, “Issues come out that I may not even have been aware of or had the words to express. It helps my supervisor and my classmates really get the whole picture” (Fish, 2008, p. 75). Fish’s study demonstrates how art imagery and metaphor can communicate more than words alone in supervision, and can perhaps expand the conversation to address multiple developmental issues.

Du Preez and Roos (1998) asked their participants to journal, make a visual representation, and then write about their development as counselors. Visual representations helped the participants to transcend the limitations of verbal constructs and observe different parts of the whole that made up their roles and responsibilities as counselors. The participants were able to learn from the process of their visual creations or from the product as they navigated the developmental struggles of becoming counselors. The metaphors in visual form gave the new therapists anchor points and reassurance as they learned to navigate their work with clients and their transition to being professionals. For example, one participant created an image of chewing gum in its wrapper. By reflecting and writing about it she perceived that the wrapper was her protective lining around her dense, rigid square shape, but that she had the potential to

become more flexible. She developed patience with herself and the struggle because she identified her resiliency, knowing that eventually she could become a “life filled bubble” that was capable of absorbing much more (du Preez & Roos, 1998, p. 704).

Sommer et al. (2010) also used metaphor in supervision with new therapists who were still in training. They selected certain commonly known fairy tales and asked participants to listen to the stories and then share how they connected with them or not. Participants were able to identify with the characters, plots, conflicts, and themes of the stories. Discussion emerged about the struggles inherent in the process of becoming therapists, such as feeling like a marginalized ugly duckling that would eventually transform into a beautiful, confident swan. Some participants reported feeling as if they did not fit into their networks of professors, supervisors, and practicing counselors, as well as feeling as if they were at the bottom of a hierarchy in which counselors were lower than other mental health professionals (Sommer et al., 2010). Participants opened to more authentic discussions as a result of the central stories, and shared feeling both overwhelmed and motivated by the work that they were doing. The results of this study suggest that the use of metaphor in supervision may help to normalize new therapists’ struggles and strengthen their support systems.

Metaphor in the central stories used in supervision motivated novices to report that they could visualize the tasks that they were required to complete, which helped them to visualize reaching their goal (Sommer et al., 2010). Participants in the study by Sommer et al. (2010) reported being able to reflect upon and learn to navigate the balance between autonomy and external dependence, which is developmentally appropriate for new counselors, as a result of the exploration of themes within the stories they read

together. Conversations about their experiences of feeling misunderstood, marginalized, and out of place were expressed in metaphor and brought deeper expression and validation among peers. Themes unfolded from deeper discussion and they explored self-doubt; gained confidence, self-awareness, and self-acceptance; and discovered insight that they needed to trust their intuition (Sommer et al., 2010). Metaphor was not well received by all, however. Some participants reported negative reactions and felt the stories' relations to counselor development were stretched. Through deeper group discussion about themes, however, those who did not initially make connections to the stories were able to later make the connections (Sommer et al., 2010).

New elementary and high school teachers go through a similar process of development to the one counselors experience, and need both mentors and like-minded peer supports to help the process (Cuddapah & Clayton, 2011). In a study by Cuddapah and Clayton (2011) with new teachers adapting to their profession and working in challenging settings, teacher mentors helped new teachers to foster like-minded peer mentor supports by using prompts to relate to one another in a peer support group program designed to navigate developmental challenges and professional identity formation. For example, they visually expressed answers to the question, "what color are you today?" and created collages about their transitions into becoming new professionals (Cuddapah & Clayton, 2011, p. 71). Participants reported how helpful art imagery and metaphor was in their transitions as well as for building community and collective confidence.

Supervisees and supervisors can evaluate the supervisory relationship with the use of poetry as an arts-based inquiry in art therapy (Schreibman & Chilton, 2012). Poetry,

like fairy tales and short stories, includes literary devices such as metaphor and similes to express experience through words that invite visualization. Schreibman and Chilton (2012) believed that poetry gives “aesthetic voice” (p. 190) to the new art therapist’s experience, which illuminates dynamics in supervision. Through writing poetry about their discoveries, the supervisor and supervisee could engage in rich discussion about issues both positive and awkward. For example, an art therapy supervisee received thanks from a client and after writing poetry in response a metaphor emerged of the supervisory relationship. The supervisee and supervisor conceptualized their relationship as a pay-it-forward dynamic “like a small waterfall,” a trickling effect from supervisor to supervisee to client (Schreibman & Chilton, 2012, p. 189). In turn, the supervisor deepened her understanding of how to guide new supervisees and the supervisee deepened her appreciation for the importance of supervision as a tool for her development (Schreibman & Chilton, 2012).

Professional Socialization

Socialization affects the newcomer’s transition into the culture, values, and communication patterns of the system (Louis, 1980). Socialization is a major consideration for newcomers entering into professions and workplace systems. Organization socialization is the process of newcomers accepting their new roles within an organization. External support is very important for new counselors, and is most important at the beginning of a counseling career and during transitions (Skovholt & Rønnestad, 1992), making socialization an influential factor on the counselor’s development. Socialization forums for new helping professionals entering into the workplace are educational programs, peer groups, professional organizations, mentors,

coworkers, and workplace supervisors. Through socialization, newcomers begin to appreciate the values and expected behaviors within the organization, and may experience a drastic reality as they face unfamiliar social cues and “learn the ropes” (Louis, 1980, p. 230), or find out how things are done. According to Louis (1980), “learning the ropes” comes in stages. The newcomer anticipates unrealistically from the outside what life will be like in the new role, and once inside, the newcomer begins to adapt. “Learning the ropes” is essentially learning the culture of the workplace, and the newcomer develops a schema, or a map, to navigate the new territory. Newcomers must learn the culture and the role they play in it in order to perform; ideally, predecessors convey their expectations for newcomers when they first enter.

Information seeking is the primary method newcomers use to adapt and become productive members of a workplace (Nifadkar & Bauer, 2015). Newcomers should have a broad range of networks because roles and organizational learning are very different. Big picture information provides role clarity, and informal closer networks create belonging and integration (Morrison, 2002). Coworkers and work supervisors spend a lot of time with newcomers and are therefore more influential over newcomers’ socialization (Nifadkar & Bauer, 2015). AATA might be more of a distal organization in that it is a member organization that is not directly involved in the new art therapist’s day-to-day life. Access to most of AATA’s information is online on its website, in newsletters sent through e-mail and postal mail, and in the organization’s peer-reviewed journal. AATA’s influence over socialization for the novice art therapist could be limited unless the novice is actively involved in keeping informed, which is a good practice. However, for art therapists this could be problematic because their coworkers are usually not other art

therapists. As a result of the isolation creative arts therapists experience, seeking out supportive networks in one or more ways (such as participating in peer associations, professional associations, informal supports, and supervision) is essential for professional connection, socialization, and support (Cashell & Miner, 1983). Orientations and social gatherings provide networking opportunities (Morrison, 2002). Being a member of and attending supportive like-minded groups will benefit professional newcomers' adjustment to the helping professions and to their roles (Lowndes & Hanley, 2010).

New counselors struggle with anxiety and insecurity (Skovholt & Rønnestad, 2003). High anxiety is commonly present for any newcomers from other disciplines, which could get in the way of their adapting and adjusting (Nifadkar & Bauer, 2015). Compounded anxiety may create complications for those new counselors and art therapists who struggle with assimilation and socialization—whether into the field of helping professions at large or within organizations where they stand out from others, as Cashell and Miner (1983) discovered was the general experience of creative therapists in their study. For individuals with extroverted personalities, high visibility is less of an issue; however, art therapists generally seem to be more introverted (Bouchard, 1998). Personality affects socialization. Internal locus of control, agreeableness, extroversion, and need for control all shape network building (Morrison, 2002), and building networks is part of the socialization process.

Education initiates the process of learning the social, intellectual, and moral values of a particular subject. The education program is a process of adaptation (J. Burman, 2008) and socialization (Griffiths, 2013). In a study by Orkibi (2010), creative arts therapists reported feeling more supported in school than after graduation. They were

in classes with other creative arts therapy students and supportive professors, and therefore felt a stronger collective identity (Orkibi, 2010). Clinical internships and practicums are in place in art therapy training programs to foster professional socialization so that novices can understand the work world more fully (Feen-Calligan, 2005). “Professionalism is produced and reproduced through socialization” (Griffiths, 2013, p. 233), and the educational program socializes the naïve novice. Being naïve in the safety of the like-minded group helps one cycle through new information to accommodate and adapt (J. Burman, 2008; Orkibi, 2010; Orkibi & Bar-nir, 2015).

Upon graduation the effects of socialization on identity are acute, because all of a sudden the newcomer is no longer only responsible for learning theory and content (Griffiths, 2013). The novice is immersed into a flood of new learning in multiple social territories. Students becoming new professionals may benefit from maintained contact with the school program in the form of mentors, social networks, and support systems, as discovered by Lev-Wiesel (2003). The school may not have the resources to meet the needs of graduates, however, in which case novices must take responsibility for their own learning.

Louis (1980) identified that newcomers were more apt to stay in an organization when they were exposed to the reality of the organization, including the work, the roles, and the culture. Realistic exposure in the form of information helped the newcomer to create a sort of realistic psychological contract with the organization and develop realistic expectations that could be met, rather than result in disappointment. Socialization with peers and supervisors was a major part of passing on such knowledge. Louis ultimately identified transparency and informational exchange as the most supportive approach, and

that “sink or swim” norms were dysfunctional and resulted in increased turnover (1980, p. 247). If a newcomer art therapist does not stay in a position, or in the field itself, long enough to procure the required number of post-education hours, then successfully earning an ATR-BC becomes impossible.

The newcomer needs to be able to ask questions and feel supported, and it is natural that the newcomer would want to feel a sense of belonging (Morrison, 2002; Nifadkar & Bauer, 2015). Mentors and social supports aid new helping professionals to manage the realities of the work by emotionally supporting them and guiding them with information to grow into their role and to navigate the workplace (Cashell & Miner, 1983; Cuddapah & Clayton, 2011; du Preez & Roos, 1998; Feen-Calligan, 2012; Fritschler, 2013; R. Hogan, 1964; Kapitan, 2012; Lowndes & Hanley, 2010; Moss et al., 2014; Orkibi & Bar-nir, 2015; Rønnestad & Skovholt, 2003; Skovholt & Rønnestad, 1992, 2003; Sommer et al., 2010; Vondracek, 2001). Rønnestad & Skovholt (2003) revealed that mentors and supports were key factors of developmental success for novice therapists, new professionals who would be entering a new workplace. Lev-Wiesel’s (2003) study revealed that social work students entering the workplace may benefit from continued ties with their educational institution, professors, and academic mentors to aid in their transitions as novice professionals. Continued ties offered support with theoretical approaches and maintained like-minded relationships as entrants navigated the workplace and learned to adapt their approaches as they put them into practice (Lev-Wiesel, 2003).

Job Fit and Satisfaction

As already discussed, the more recently a helping professional has graduated the more they are in the midst of a critical time in their development, experiencing pervasive anxiety, depression, insecurity, reliance on external support and expertise, feelings of inadequacy with respect to their skills, confusion about their roles, and an overall sense of ambiguity (Skovholt & Rønnestad, 1992). Job fit and job satisfaction may be important for newcomers and other stakeholders to explore, considering the developmental crisis during which the novice art therapist enters the field. These are important for their survival, job placement, retention, and successful transition to professional art therapist.

Rehfuss et al. (2012) conducted a study of counselors' job fit and satisfaction and learned that just because a counselor may fit a position well does not mean that the counselor will be satisfied in it. "Fit" includes having the skills, knowledge, ability, and training for the role, as well as how well the job position matches one's qualifications. Retention of counselors is important, according to Rehfuss et al., because difficult economic times increase the need for more services with fewer resources in the human services professions. Similarly, just because an art therapist can do the job does not guarantee satisfaction with it. Conversely, art therapists often take on related roles that are not exact matches and may become resilient and adapt to specific job fits. The study conducted by Rehfuss et al. suggested that further exploration of person and job fit could be explored within the human service industry because the job climate is constantly evolving and counselors are constantly adapting.

Orkibi and Bar-nir (2015) found that art therapists were more satisfied when they felt that the work they were doing had purpose and meaning. Rehfuss et al. (2012)

suggested that if counselors want job satisfaction, then they should find employment that will fulfill their work interests while also meeting their family and personal life needs in the form of pay, benefits, or training. Complicating counselors' job satisfaction is the ambiguity of more self-directed therapies such as pastoral youth workers, integrative counselors, and creative arts therapists because they felt envious and seduced by other helping professions that were more established and regulated (Griffiths, 2013; Lowndes & Hanley, 2010; Orkibi & Bar-nir, 2015). In Orkibi and Bar-nir's study, creative arts therapists who compared themselves to other helping professions felt marginalized, causing more insecurity and impeding their focus on the value of the work they were doing. Integrative counselors found that although at first they felt alienated from other helping professionals, by staying true to their unique integrative, self-designed approaches to therapy they became more flexible, adaptable, and confident (Lowndes & Hanley, 2010).

Dik, Duffy, and Eldridge (2009) stated that when individuals feel as if their job is a "calling," they experience less stress and more job satisfaction. Making meaning of a career may be influenced by individual values and purpose and may, in turn, increase meaning and purpose in an individual's entire life (Dik et al., 2009). Careful selection of what a counselor is and is not, what the counselor can and cannot do, and what has meaning and value to the counselor is one of the seven suggestions for counselor stamina made by Osborn (2004). When individuals feel as though their work is a calling, they are able to determine who they are, what their role is, and what they can or cannot do, aiding in stronger boundaries, which leads to higher job satisfaction (Dik et al., 2009). Jennings and Skovholt (1999) illuminated the fact that master therapists are typically very highly

functioning, mentally healthy, optimally developed individuals who successfully transitioned through and transformed as a result of personal, client, professional, and organizational experiences, and reported high levels of job satisfaction.

Summary

This review of related literature explored the professional developmental crisis and many things that impact the new helping professional. Newly launching art therapists are entering into a postmodern climate where blurred boundaries and multifaceted ways of working concurrently exist. New therapists are tasked with developing a professional identity that includes understanding themselves in relationship with their clients and other professionals. They at first identify idealistically with theories of practice, clients, and their mentors, and through navigating the normal struggles new counselors face, become more realistic in their expectations. They will experience pervasive anxiety and insecurity during their transformation because ambiguity describes the work of the therapist as they put theory into practice.

Imagery and metaphor can provide anchors for experience within the ambiguity and role confusion they can expect. Unique client experiences can have great impact on the therapist's professional development. New helping professionals can expect to experience disillusionment during their process of individuation from other professional subjects upon which they are dependent like mentors and the profession itself, causing them to look for something or someone to blame for their struggles until they regained balance. Art therapists can feel lonely because the journey is an transformative process in which they must constantly adapt and adjust to external influences, though mentors and like-minded supports are built-in to the paradigm of training and post-education. The

process of evolving the raw self into another shaped, yet authentic version of the self is tumultuous, exciting, exhausting and is an accomplishment of hard work, flexibility and effort.

CHAPTER 3: DESCRIPTION OF THE VIDEO PROJECT AND DISCUSSION

Methodology

I designed this qualitative research study so that I could go into depth and study the lived, personal experiences of recently credentialed art therapists' developmental experiences during their transition to becoming credentialed. Qualitative methodology was appropriate because it incorporates subjective and interpretive processes that allow for emergent and unpredictable results (Bottorff, 2014). Qualitative research can be "complex, rich, messy and ambiguous" (Finlay, 2011, p. 9) in its deep exploration of phenomena. For my study, I sought to explore perceptions and nuances of the art therapist's journey through interview-style storytelling and art making.

I used a hermeneutic, phenomenological approach to gather data through semi-structured interviews and imagery that investigated the lived experience of the participants. Whereas phenomenological research captures the world as it is perceived to be (Finlay, 2011), hermeneutics places the researcher in the role of translator (Kennedy, 2014). Hermeneutic-phenomenological research includes understanding that the researcher is subjectively intertwined with the lived experiences of the research participants (Finlay, 2011). It was through the lens of this paradigm that I interpreted and reflexively analyzed the data obtained from the qualitative interviews.

Expression and interpretation in hermeneutic phenomenology invite the potential for meanings to emerge in richer detail and context because the researcher has a close relationship with the data. For example, I can translate my 2-year-old son's language to his grandparents when he gives them an update about his day over the phone. Interpretive phenomenological analysis, a method I employed during my hermeneutic reflexive

immersion into the data, differs from hermeneutic phenomenology in that the researcher not only interprets or translates the participant's experience but also considers the participant's sense-making in cognitive-affective and existential domains (Finlay, 2011). Participants see themselves and make sense and meaning of their experience through these very domains. Using interpretive phenomenological analysis, the researcher considers each individual's story separately and then looks for themes across cases. In my research design context, the hermeneutic phenomenological process guided my initial interaction with participants, but as I collected data, I began to use interpretive phenomenological analysis with the stories and images in a deeply intertwined way. For example, using the example of my son, if I were to interpret his story to his grandparents, I would want to convey more than the details of my son's day. I would want to interpret how he made sense of the experiences of his day and what they meant to him.

Perhaps the natural link between qualitative research and arts-based research (Leavy, 2009) is the channel through which I arrived at my particular arts-based data analysis approach, as detailed below. An initial interpretive analysis evolved into arts-based analysis that was an organic and emergent shift in methodology. Arts-based research supports understanding through an expressive form and helps an audience feel the emotional quality of the work (Barone & Eisner, 2012). Through metaphor and other creative devices, arts-based research lets audiences be nearer, through vicarious experience, to dimensions of the world than social science paradigms might expose. In the example of my son, instead of translating the actual details of his story and what it meant to him, I would tell his story by interpretation, in a new story using metaphor and allegory to allow his grandparents to feel and imagine the nuances of his experience.

Participants

Sampling

Recent ATR-BC recipients are a very specific population and, therefore, a purposive sample was appropriate. Purposive sampling tests select specific representatives of a certain population who may have similar experiences on a topic (de Chesnay & Fisher, 2015). To recruit participants, I used a networking technique called snowballing. In this approach, the researcher calls upon the personal and professional referrals of each participant to find other participants who uniquely fit participant criteria (de Chesnay & Fisher, 2015). Selection criteria limited the investigation to recent experiences of becoming credentialed because I wanted the results to be of service to current stakeholders in the process. Participants were required to be newly credentialed board certified art therapists, having obtained their ATR-BC credentials no earlier than the year 2015. I later expanded my criteria to include those who obtained their ATR-BCs no earlier than the year 2013 and amended my Institutional Review Board application because initially I was unable to locate enough participants.

I limited the sample to eight participants, which was a sample size that was manageable and allowed investigative depth into each interview. I limited my search to participants who were practicing art therapy in the United States to avoid having too broad of results. Investigation of art therapists' international journeys of earning an ATR-BC may be an important expansion for future research.

Recruitment

Technology enabled the entire process from recruitment to communication to analysis and finally to art making. To recruit participants, I drafted an announcement of who I was looking for and sent it to the Coalition of Art Therapy Educators, an art therapy educators' list-serve of art therapists who could refer participants (Appendix A). I also sent this e-mail to my professional network of art therapy colleagues, peers in my doctoral cohort, art therapy educators, and art therapy supervisors, all of whom with knowledge of potential referrals.

Using e-mail and contact links on Facebook, I sent electronic messages to several local chapters of the American Art Therapy Association, requesting referrals from their memberships and permission to post recruitment messages on their homepages. Each chapter's Facebook page had different accessibility and permissions, which affected how they received the message from me, and warrants research beyond the scope of this paper.

A list of newly credentialed art therapists is published in the ATCB's newsletter that is circulated to members of the organization. Anyone who is registered and credentialed through the ATCB receives this newsletter. I contacted the ATCB and requested that my recruitment message be included in the newsletter; however, although my request was considered, the publication of the newsletter was scheduled for circulation outside of my research timeline. Therefore, I reviewed the ATCB lists of newly credentialed art therapists that were released between 2013 and 2016 and attempted to directly contact individuals on the lists through social media or e-mail, if contact information was publicly available. This process was time-consuming and

required that I manage my online professional presence on my personal Facebook and LinkedIn profile pages to reflect the legitimacy of my research. I reasoned that if I unexpectedly solicited professional members with a recruitment request, I could expect reciprocal responses from those I contacted who would use online channels to verify my intentions and the validity of the solicitation.

Once I received either an interested potential participant or referral source, I sent an e-mail invitation that described my study to that individual (Appendix B). I created a spreadsheet and documented my referrals to keep track of the coordination process for each potential participant. If the individual responded that they were interested in moving forward, I sent them the informed consent form with detailed instructions in an opt-in or opt-out option (Appendix C). Using e-mail exchanges, I attempted to coordinate phone meetings to describe the details of my study with interested participants, but this proved to be an inefficient use of time. Instead I adapted and used a program called MediaSite.com to make prerecorded, web-based video messages for participants. I sent a tailored greeting with a split presentation screen: a view of myself talking and a view of the consent materials. In the video message, I reviewed the materials and laid out detailed instructions and information about what I was asking them to do if they agreed, and what the next steps were. I limited these messages to 5 minutes to be mindful of participants' time. Once participants had viewed the video message, they responded by e-mail with their consent and provided time and date options for the interview. I confirmed through e-mail and maintained the ongoing spreadsheet of scheduled interviews.

Participating Art Therapists

Eight art therapists participated in the research. I did not ask for any specific demographic information, such as sex or gender identity, because I selected to collect emergent data. Based on common indicators, I assumed participants were all female, but I recognize my bias in making this assumption. I report this with intention, because AATA's membership is predominately female. All of the participants reported that "art therapist" was not their first career. I coded participants and generalized their information to protect their confidentiality. Coding participants with alphabetical letters helped me to easily refer to their art and stories during my arts-based analysis. When writing up results, I omitted specific identifiers that audiences could deduce identities within the art therapy professional network.

Alice (pseudonym), from Pennsylvania, graduated from art therapy training in 1999 and earned her ATR-BC in 2015. She explained that the credential was not important to her, other than making herself competitive as an educator in art therapy. She felt angry when she took the exam because she believed that it did not reflect her work as

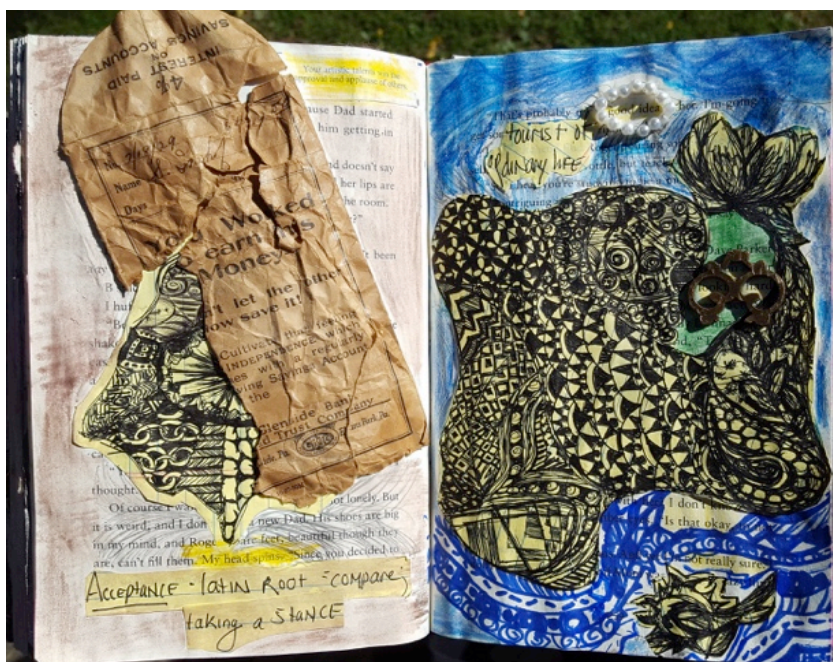


Figure 1. *Journey to the BC*, by Alice

an art therapist, stating, “the priorities were off.” In response to the directive, Alice created two pages in her art journal (Figure 1).

Beatrix (pseudonym) graduated in 2013 and earned her ATR-BC in 2013. Her incentives for obtaining the credential were the desire for advocacy for the art therapy profession, professional identity, and a personal goal. She relocated to Arizona from the Midwest, where she had studied, and struggled to be recognized as a therapist working in an acute psychiatric inpatient hospital. She had “unwrapped the knot that is the ATR, but the book was still shut”—a metaphor that was reflected in the art she created (Figure 2)—so she worked simultaneously on her state licensure, “a much harder knot.” When working on her state license she wanted to “throw my hands up and quit.” Once she had

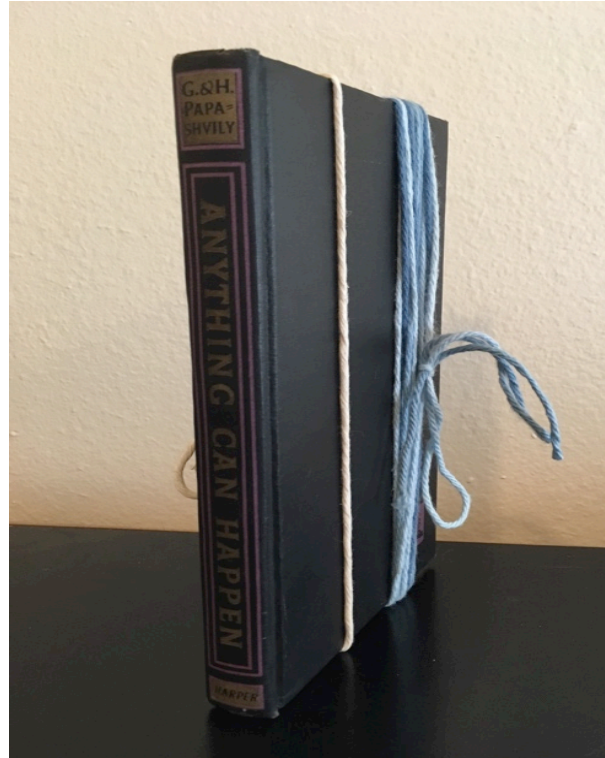


Figure 2. *Journey to the BC*, by Beatrix

earned her ATR-BC and her state counseling license, she received more professional recognition and felt valued.

Charlotte (pseudonym) graduated in 2011 and earned her ATR-BC in 2016. She sought her credentials out of “allegiance to the profession,” “for the greater good,” because it “adds clout to the profession.” It also was her personal, professional goal: “I worked this hard already, why wouldn’t I get it?” She moved to Massachusetts where she worked in an outpatient clinic as a therapist, then to North Carolina where she worked in a day treatment facility, and finally to her current residence in Connecticut, working in a school setting. Her most fulfilling position did not pay well, and other positions did not fit her well. She spent a great deal of time and money on her credentialing and post-education supervision. She shared that at times she asked, “Will I always have to fight for this?” but that she remained hopeful. She also stated that throughout difficult times,



Figure 3. *Journey to the BC*, by Charlotte

“moments of beauty existed.” She created a pastel drawing in response to the directive (Figure 3).

Drew (pseudonym) had returned to graduate school for art therapy when she was 40 years old. She had management and clinical experience prior to studying art therapy. She graduated in 2010 and had a 5-year journey to earning her ATR-BC in 2015. Drew reported that her incentive to obtain the credential was to gain professional recognition and, like Beatrix, she worked on her state counseling license and national counselor credentials simultaneously. She paid for art therapy supervision privately and struggled to find a qualified supervisor who could supervise her art therapy registration and counseling license. Her supervisor was not affiliated with her workplace. She described her credentialing journey as a “process, not a peak,” and reported that the process was “complicated, not easy,” and that she felt like she could only “go the hard way.” Drew worked with a community behavioral health agency in Arizona, relocated to Colorado and worked in a community organization, and then returned to her previous position in Arizona to take a promotion. She named the marker and colored pencil drawing she created in response to the directive (Figure 4).



Figure 4. *Hanging by a Thread*, by Drew

Elizabeth (pseudonym) graduated in 2013 and earned her ATR-BC in 2016. Her incentive was professional advancement, although she also earned her current state's counseling license for her "job." She studied in the Southeast United States, relocated to the East Coast, and then settled in the Northwest. She reported that her theory of practice was still evolving, but that she worked with a variety of populations including children, seniors, and adolescents in the juvenile justice system in mostly nonprofit organizations. Elizabeth did not have a supervisor in her workplace and had to find off-site supervision.

She had a difficult time locating a qualified and affordable art therapy supervisor, but for a period, an art therapist offered her pro bono supervision. She felt that financially, supervision was a barrier to her ability to earn her ATR-BC. In response to the directive,



Figure 5. *Red Riding Wolf*, by Elizabeth

Elizabeth created a mixed-media painting with embroidery (Figure 5).

Fran (pseudonym), who lives in Maryland, graduated in 2008 and earned her ATR-BC in 2013. She did not feel that her educational program conveyed the credential as important to earn, and her incentive for obtaining it was to “professionalize” herself. She stated that her credential did not make a difference in her income, that it had little impact and visibility in the workplace, and that she relied on her state mental health

license credential for monetary value. Fran reported that her artist identity “held me up in the first 2 and half years” of her journey toward credentialing when she felt like “an indentured servant.” Many of her professional decisions were like “anteing up,” and she relied on faith in herself, sometimes leaving positions without a clear plan for stability but “things got bigger.” She paid independently for off-site supervision, which she described as “essential.” Fran created a work of embroidery in response to the directive (Figure 6).



Figure 6. *Journey to the BC*, by Fran.

Gerda (pseudonym) lives in New Jersey and earned her ATR-BC in 2015 after graduating in 2013. She felt that the more important achievement between the ATR and ATR-BC was earning her ATR. She described her journey toward earning her credential as being mixed with balancing new motherhood and coming in “drips and drabs”; she also called it “grueling.” Her incentive for earning an ATR-BC was that being an art

therapist was a way of living and being in the world, and she wanted to embody her identity. Gerda worked part-time in a trauma-informed partial hospitalization program using a dialectical behavior therapy treatment model, supervised on-site by an art therapist. Neither she nor the other art therapist was eligible for the state license, and though Gerda was sought out for consultation by non-art therapy colleagues, she said she felt like “a second-class citizen.” In speaking about the ATR-BC, she shared, “It is entirely possible to spread your ideas without the letters.” In response to the art directive, she created a mixed-media box (Figure 7).



Figure 7. *Whole Container*, by Gerda

The final participant was Harriet (pseudonym), who lives in Pennsylvania. Harriet graduated in 2011 and earned her ATR-BC in 2013, 27 months later. When asked what her incentive for earning the credential was, she stated: “There was never a question, I was just going to get it,” and explained that it was a personal goal of hers and also her

responsibility to the profession. Harriet worked in a community partial hospitalization program with adults with severe and pervasive mental illness. After years of experience and armed with her art therapy credentials and state counseling license, she advanced to a clinical supervisor position in her company. She expected her journey to happen on a timeline, but learned that she needed to use her senses and “feel out which next step” to take next. She also felt that her journey “is never done.” Harriet’s agency did not provide art therapy supervision and she felt she needed someone to guide her, expensive or not. She paid for private supervision with an art therapy supervisor who provided an affordable hourly rate. She felt that supervision for her was a framework, the stability that she needed while she “navigated” the “uncertainty.” She named the painting she created in response to the directive (Figure 8).



Figure 8. *Dance in the Danger*, by Harriet

Data Collection and Analysis

The data collection and analysis process organically evolved from a qualitative paradigm to arts-based analysis. The two processes occurred in an overlapping, iterative process whereby I cycled through gathering data, processing data, responding to feedback with adjustments through reflection and creation, and verifying results with participants.

Data Collection

I asked each participant to make an art image, on their own time but by an agreed-upon deadline, which captured the essence of their experience between graduating and becoming credentialed and identifying as a professional art therapist. Participants were given approximately 2 weeks to make this art piece and schedule the follow-up interview for 40 to 60 minutes. Participants sent image files of their photographed art pieces via e-mail prior to the start of their interview with me. I viewed the images to make sure I could open them, but then waited to study the images until during the interview. (I will refer to the interview and art images collectively as “the interview package” when there is a necessary distinction that both art and words be reported as being shared together).

The interviews were conducted via videoconference using Skype. Several minutes before each interview, I prepared my computer by opening both Skype and MediaSite in order to record my desktop view and the video chat, as well as to open the image files. My computer screen was split, with the video chat window on the right and the images open on the left.

During the scheduled interviews, I asked participants to respond to one semi-structured interview question: “While studying this image, tell me a story through metaphor about your experience of becoming credentialed and identifying as an art

therapist, starting from when you graduated from your art therapy training program.” I listened to their stories, studied the art with them, and took notes, jotting down key phrases or ideas that I wanted to revisit or explore with the participants in the interview. I used open-ended and closed follow-up questions about specific elements that seemed important. Important elements included formal processes and logistics, emotional and financial experiences, certain elements in the art images that needed clarification, and connections that the art therapist made about her art and experience.

My interactions with the art and the art therapist were influenced by my skills and training in my art therapy practice. I understand images as language and how to facilitate using interpersonal communication skills. So, for example, I shared with participants during the interview how I was experiencing their images and how I was beginning to imagine how I might interpret what they were sharing with me. Interestingly, with each interview, I re-experienced the transition to credentialing through a new perspective. Using reflexive critique, I asked follow-up questions during subsequent interviews that were tailored to specific elements of the journey, which enriched my discovery of overarching themes.

I realized that my personal journey toward credentialing could predispose me to not see the phenomena objectively, although it also provided me with a unique insight that allowed me to hear implicit meanings and nuances within the stories of others’ journeys. Therefore, I invited a group of graduate art therapy students to make art in response to the data collected. Students signed confidentiality forms (Appendix F) with an expansive list of possible duties, because the creative process was unfolding and I wasn’t sure exactly what direction it would take. I included this element in my study for

several reasons. The overall purpose was to check my biases and interpretations because of my personal relationship with the journey the art therapists shared. Graduate students are embarking on the journey while still in the “hive” (graduate training) and they often question what to expect upon launch. I wanted to hear from representatives of my future audience what seemed important and how. Our team discussed emotions, details, dynamics, and ideas, and I shared authentically my creative ideas about the outcome. Students shared feedback about my ideas and offered suggestions that either reinforced what I was working on or opened my thinking up to new considerations. However, these student contributions to the final project did not extend beyond this sharing of individual art images that they made and offering feedback and observations.

Data Analysis and Video Creation

Arts-based research permitted me to engage in the investigation by creatively interacting with the participants’ words, feelings, and imagery (Leavy, 2009) when I analyzed the emergent data. I approached the work of analysis methodically and systematically. I followed the art with rigor, being attentive to phenomenon such as details, themes, colors, metaphors, media and materials. I physically sat in a room filled with the data and allowed my ideas to percolate until the data led my thinking into creative activity. I returned to the data again and again, informed by the different areas of my knowledge (McNiff, 1998). My interpretation emerged through diverse media channels in its own form, arriving in the world in scattered fragments that seemed to begin to fit together. I methodically pieced these fragments together as if they were a puzzle. The process resulted in the final, mixed media art piece, a digital video of a narrated and illustrated allegory.

Focusing the Data

In the first phase of data analysis when I first began to engage the process, I printed participants' digital images of their artwork and grouped them together by artist (Figure 9). I initially planned to make puppets to tell the stories of the participants. The



Figure 9. Artwork Layout

puppets would reenact stories, travel through their images, and reflect the essences of the participants' stories. I intended to use theater and performance storytelling techniques. I tacked the images up on a large board and studied them for themes. Finlay (2011) stated that if the researcher feels stuck or lost in the complexity of the experiences and the data, talking with someone can be helpful. Because of the dramatic and performative direction in which I was heading, I met with a theater costume designer who agreed to work with me to create puppets.

In an informal work-shopping conversation with the theater costume designer, who was also a puppeteer and artist, I learned to use play analysis to work with the images and stories, and discovered my plot. The process I used started with creating a word list from each interview and the art that accompanied it. I arranged the art images in a ranking order, established a beginning and an end, and then identified the arc of the story or the thread to follow. The theater costume designer challenged me to identify three key words that described the images and themes and then explore to find the same three words as an alliterated set to create cohesion. A similar process of selecting three main, major, or powerful ideas or quotes, as well as identifying a storyline during the necessary steps of being selective with the data, is used by phenomenological researchers (Finlay, 2011). “You do not have to report everything” (Finlay, 2011, p. 250).

The three strong themes I identified were tangle, tenacity, and trust. All the participants had encountered a “tangle,” or problem or struggles, and each of them persevered through it toward their goals. Yarn, stitching, evenly placed brads, evenly placed beads, an image of a climbing rope, a tangled doodle, a wrapped book knotted shut—all led me to the tangle and an image of the process of untangling. Undoing a tangle requires patience, focus, and tenacity; one must find the end and follow along until the tangle is released. Usually one organizes string or yarn to prevent another tangle. This became a metaphor for the participants’ reports that they collected their post-education hours like wrapping a yarn ball. Though their paths contained unpredictability, they also contained some organized predictability. Trust in one’s self and trust in the journey was required along the way. These themes were compelling, but, the theater designer told me,

okay?” into her art piece as she felt her way through ambiguity, many times during the arts-based analysis process I stopped and asked myself, “Is this okay?” The arts-based analysis required me to give myself permission with each movement forward. The notes in Figure 10 spiral and turn, and I did not orient myself from any one angle when working on it. The paper captured movement and ideas as I ran from one image to the next and made connections on the paper.

Storying

The participant Elizabeth had presented themed characters in her art piece—in the form of a fierce wolf and innocent maiden (see Figure 5), which I reflected upon further. I studied the Grimm’s Fairy Tale, “Little Red Riding Hood” (Junior Deluxe Editions, 1954, p. 149-155), which is a classic fable of caution with multiple endings and metaphors. At first, Red Riding Hood encounters a wolf, is tricked and then eaten, as is her grandmother. Riding Hood is a victim, but a huntsman deduces what happened and cut open the wolf, rescuing Red Riding Hood and Grandmother who were still alive inside its body. When they were tricked by another wolf, they outsmarted it, the wolf killing itself accidentally and they both living happily. Red Riding Hood was innocent, but clever. She had gifts to offer. She didn’t expect to encounter a wolf and was tricked the first time. She was given another chance by an external rescuer. She learned from her first mistake, which led to a happy ending for her. Red Riding Hood led me to explore the idea of a “cautionary tale,” which evolved into the teaching tool of a “parable” or “fable” as I related back to my research purpose of normalizing the journey from graduation to ATR-BC credentialing.

I discovered a block in my creative process when I did not yet have a main character to encounter a tangle, be tenacious, and rely on trust. “You still don’t have a main character. Who is the puppet? Who is going to go on this journey?” asked my theater costume design colleague (S. O’Neil, personal communication, December 26, 2017). In a hermeneutic phenomenological process of data collection, the researcher plays a central role in co-constructing the data, a possibly transformative process for both researcher and participants (Finlay, 2011). This was true in my case. I needed a main character to go on the journey—a co-journeyer, a metaphor for me, the researcher who tells the tale.

During my own journey toward earning my ATR-BC, I referred to art therapists as “pollinators” living in an “entangled bank” where they coevolved with the plants and animals. Adaptation and interspecies interaction were major ideas in this metaphor. Art therapists sometimes create their jobs and coevolve with their terrains. The pollinator changes what she lands on, and it feeds or impacts her. Therefore, I “invited” my metaphor of the journey toward earning my ATR-BC to join the data, and introduced the main character of the bee. The bee would set out to learn about the participants’ lived experiences and journey through the world of art and metaphor co-constructed by me as the researcher, along with the participants.

I created a drawing of a little bee as a first step toward designing a puppet. I intended to make several small-scale diorama stages with collage using the printed images of participants' art pieces and my additional art made in response to their images, in which the puppet could interact and I would film. Creative storytelling is not a familiar form of artistic expression for me, as it required me to trust the emergent arts-based analysis. I went to the children's section in my local library and sat for hours reading and studying picture books. I explored the works of author and artist Chris Van Allsburg, because his work invites interpretation of the elements in his stories, and the artwork is as important as the words. I attempted to develop my plot using his books like a code. This meant I would need a title page and 14 images with 14 blocks of narrative to tell the story. I wrote my initial story and began imagining visuals to match. I created a children's book storyboard using metaphor from the participants' images and interviews (Figure 11).

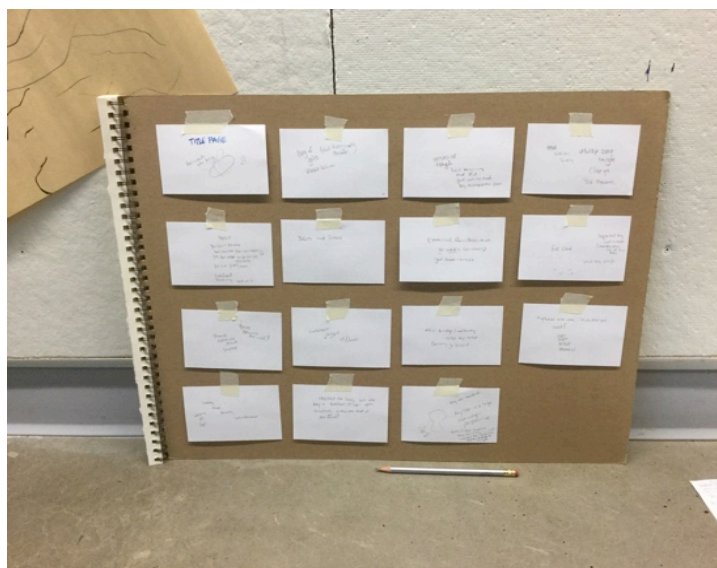


Figure 11. First Storyboard

Re-Storying Through Digital Media

The creative process led me to the use digital art processes in a shift from tangible media. I had become aware that important richness from the original data in the art works was lost when I embarked on a typical analytic process of theme-finding. For example, I had intended to create a response image using a diorama stage set to interpret the



Figure 12. Purple Bee

participants' images. However, as I constructed and created tangible art for this video staging, I found myself veering too far away from the original data in the artworks and the artists' poignant story details. As an art-based researcher, I was not being true to the data. Therefore, I abandoned these attempts at creating scenery and re-focused my attention on the main character. I drew a bee with my finger on my iPad (Figure 12) with the purchased application Artset Pro. I intentionally made the bee purple in response to participant Gerda's reflection that art therapists stand out among others as uniquely as the image she had collaged onto her work: that of "a blueberry ice cream sandwich." She commented, "we have to be bold and out there, that's us, we have to put ourselves out there even though we might be misunderstood" (see Figure 7). My new digital drawing

permitted flexibility to be copied and pasted into the digital images of the participants' art pieces, allowing the bee to literally "enter" the participants' imagery.

One obstacle was that my iPad drawing application was insufficiently sensitive to support my creative vision when I attempted to "travel," by way of the bee, into participants' digital images. For example, I wanted to place the bee in certain areas of the photos, or to move objects inside of the photos, or to match colors to imagery, but the program did not permit such functions. I needed to expand and explore digital art-making processes with my available resources and skills. I located a free iPad Photoshop app that worked with Adobe's Creative Cloud, but its basic, free functions still limited my vision. I needed the full Adobe Creative Cloud programs on my laptop so that I could open and modify images in Photoshop.

To actualize each new idea that emerged, I needed to learn how to use new functions of the program. As I taught myself features and functions and learned that other Adobe Creative Cloud programs existed for other processes, such as image editing, audio editing, and video editing, my vision manifested into process. Using internal help features in the programs themselves, online video tutorials and blogs, and discussion with a graphic designer, I taught myself how to proficiently use Adobe Photoshop for photo editing and basic animation, Adobe Premiere for video editing, and Adobe Audition for sound editing. I learned to compile my various files into a single Adobe Premiere file, and I then taught myself to compress files for online sharing and compatibility. The entire first round of creating and editing the video took 48 hours over the course of 5 days of immersion with the data and the creative process.

In the first iteration of the video, the main character of a bee carries a pail to collect unnamed things that she uses, shares, loses, and gains along the way. Certain gaps, such as unnamed items and the particular role of various characters in the story, were intentionally left open to allow for interpretation and imagination (Barone & Eisner, 2012) because participants had expressed ambiguity about the shared themes that arose. For example, the “wolf spider” may have been both a “naysayer” to one participant and a helpful outside perspective to another. In another example, the pail contained unnamed items that the bee thought she needed but did not use. This example could be a metaphor for having expectations that do not fit reality. The pail could contain countless items unique to each participating art therapist, including time, relationships, ideals, and money. I was intentionally ambiguous about certain main elements in the story because I wanted to let viewers live in the experience (Finlay, 2011) and project their experience onto the story.

Participant Verification

Marking the end of the early data analysis process, I shared the first completed video with my participants. Because the participants were using a variety of devices to maintain communication with me, I sent two types of Internet cloud-sharing links of the draft video: one for mobile viewing and one for laptop viewing. On a free collaboration website called Padlet.com, I set up an online discussion forum to serve as a focus group discussion board where I invited feedback from the participants and asked directed questions. All feedback was anonymous, other than my own activity on the forum.

Participants reported feeling a sense of validation and that their participation was honored through my story. Some of the specific elements in the story were questioned,

like the “wolf spider” character and the “broken key.” I asked for opinions about my choice to limit gender pronouns to *she* and *her*, to which only one participant responded, “Is there a way to be gender neutral?” The “dancing on hot coals” scene from the video generated the most activity in the discussion. I was concerned about the use of an external object—a pail—that the bee originally carried her pollen and mysterious treasures in, and asked for specific feedback about this. I also asked for responses as to how the group perceived the “familiar, encouraging voice” element in the story. (I will address these key elements of the story in Chapter 4).

Second Round of Revision

The second round of revision took 3 weeks because I had to adjust my internal images and personal attachment with the elements that needed to be addressed. Based on participant feedback, I revised the written story to strengthen the metaphors and plot. It

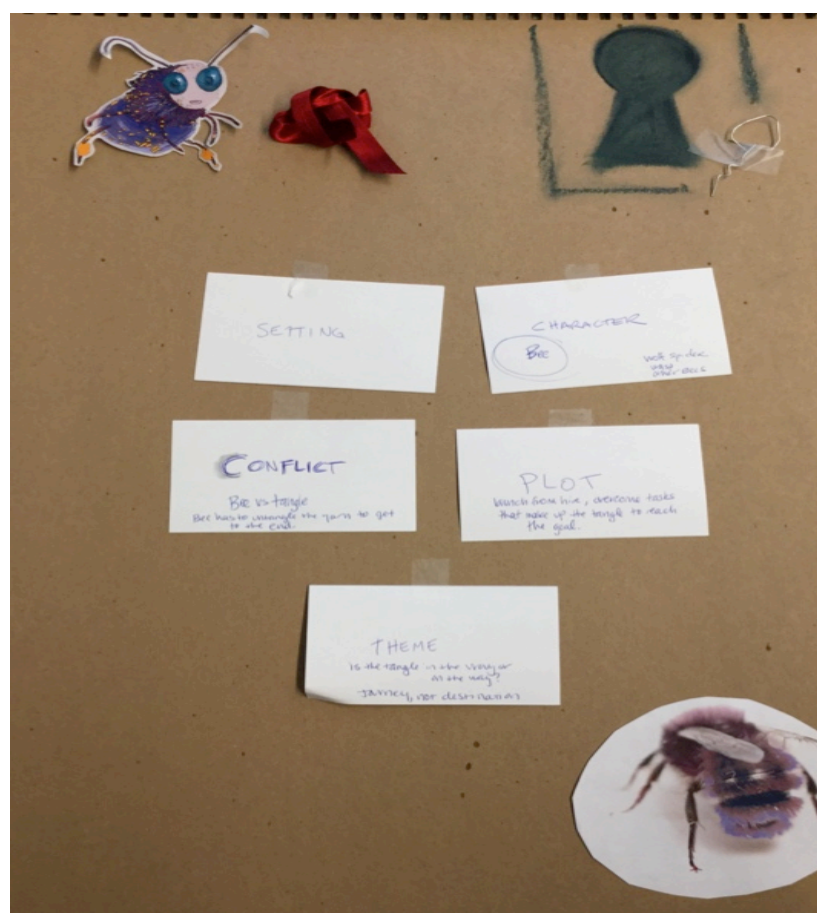


Figure 13. Second Storyboard

was during the second round of revision that I permitted myself to let go of using children's books as my foundational design and instead studied fables. This "letting go" permitted me to focus on the five key elements of the emerging story, rather than force ideas into 14 blocks. I created a new, simplified storyboard and focused on the setting, character, conflict, plot, and theme (Figure 13). I clarified that the primary conflict emerging from data analysis was between the bee and the tangle, which strengthened all of the other story elements. The plot, then, became one where the bee launches from the hive and must overcome tasks that make up the tangle in order to reach the goal. The theme of the story became "is the tangle in the way, or on the way," and the moral became, "it is the journey, not the destination."

As part of the creative process, I read through Aesop's Fables and discovered a tale about a spider and silkworm. The two creatures discussed their artistry in this fable, and the moral was that artistry is measured by its use. The silkworm had lasting, durable silk, and the spider had fast, ornate webs. I entertained the moral of this story when I evaluated the relationship between the wolf spider and the bee in the draft video. Both the wolf spider and the bee had distinctly different crafts for survival, and as metaphors for theories of practice of therapy. With this new literary connection, my understanding of the wolf spider metaphor shifted and strengthened. I then embarked on some biological studies about bees' natural predators. I learned that spiders are not threats to bees because spiders' webs are usually too flimsy to hold bees, and thus they can't catch them (Goulson, 2010; Tautz, 2008).

Final Video

I completed a final version of the story with developed characters, a deeper study of bee behaviors, an aligned setting, a plot, conflict, and a theme. I also eliminated unnecessary details or elements. I fact checked the landscape of the setting; for example, confirming with a geologist that it was geologically possible for the fire cavern to naturally occur. I spent 36 more hours editing the second version of the film with new photos, added animations, and adjusted elements, as well as a new audio track that I recorded and edited.

Role of the Researcher

Researchers are allowed a subjective role in qualitative research (Finlay, 2011) because their informed knowledge of the subject serves understanding and interpretation of the data. When interviewing the participants and studying their art, I asked questions from a place of intimately knowing my own lived experience of becoming a credentialed art therapist and my experience of working with visual language. I also listened and responded with curiosity and objectivity, relying on the phenomenological elements of the verbal and the visual. As co-constructor of the data (Finlay, 2011), each interview and image prepared me for the next because I began to see similarities and make connections from one participant to the next.

My role was to invite storytelling, followed by participant feedback based upon what was shared, and then finally to weave the data together into a synthesized new story. The data included spoken words, emotional experiences, visuals, metaphors, ideas, logistics, facts, theories, and processes. I engaged the participants with my full awareness

and attention, and then worked from notes, images, and my own art making, I deeply experienced the dynamics (Finlay, 2011) of what was shared with me.

Ethical Considerations

Social media and e-mail were my main avenues for recruitment. I made sure that I followed guidelines for convenience snowball sampling. Some of my methods for locating possible participants included actively identifying who was eligible and then seeking them out. I made sure to emphasize that participation was voluntary.

Art therapy is not a large profession, and many professionals know one another or know of one another. I made this risk explicit in my confidentiality forms because it was possible that participants could be identified by viewers through a process of deduction. I discussed with the participants that it was possible that I would see them at a conference or training after the study took place.

I also considered ethics when making my research public during recruitment. I advertised that I was specifically studying the journey to the ATR-BC credential, which could present a challenge in the profession. I wondered if the results of my study could impact my or my participants' professional reputations negatively if themes of critique emerged.

I used electronic communication, which limited security of confidential information. I also used public social media platforms to communicate and record interviews, which further limited security. I made the participants aware of this in my consent forms and included the limits of confidentiality as well as my efforts to maintain confidentiality in my study proposal.

I drew upon my art therapy skills to interview participants and discuss the art imagery. My bias is inherent as a result of the questions that I asked and the use arts-based analysis. My creative interpretation is valid, but is only one possible outcome. My perspective is biased because I experienced the transition that I was studying myself and I related many times to the information in the interviews.

Limitations

My decision to use an online discussion forum minimized interactions between participants. I attempted to stimulate online discussion, but the detached emotional tone of text on a computer may have limited responsiveness. The participants lived in three different time zones, which made scheduling difficult. A preferred method of communication would have been a live focus discussion to discuss the video.

Having a small and seemingly relatively homogenous group of participants may have limited the diversity of experiences that were represented in the video story. The story could be experienced as gender-biased because I exclusively used the pronouns *she* and *her* in the video. I made this decision consciously to represent my participant sample. The choice to use these pronouns could exclude members of the art therapy profession, which was not my intention. I hope that all art therapists will be able to relate to the video.

The video created as a result of this study may be useful for some supervision groups and not for others, because the literature suggests that not all supervisees relate to stories and metaphors. The video I created is only one possible outcome from the data. Not all art therapists may relate to the themes, conflicts, or characters it contains. The content on the website may be helpful for discussion points.

Another limitation could be that my perspective was biased because I strongly related to the participants' stories. I identified with many issues that the participants experienced, which influenced my interview questions, as did my experience with discussing artwork with clients. I asked many questions about elements in the artwork in a similar processing style that I might use in therapy with clients.

Project Outcome

The creative portfolio is positioned around the second, final video. This video contains a synthesis of participants' narrative, metaphor, and imagery, a product that stands alone as whole (Barone & Eisner, 2012). The video is a product that can be shared with art therapy students and supervisors and any other interested stakeholders. The video format permits the viewer to enter the experience. I determined that the video would "live" online so that it was sharable and viewable in the online world through which it emerged.

In addition, I created a website (Figure 14) to present the data analysis, the original images and quotes from participants, and the art-based data analysis. A website

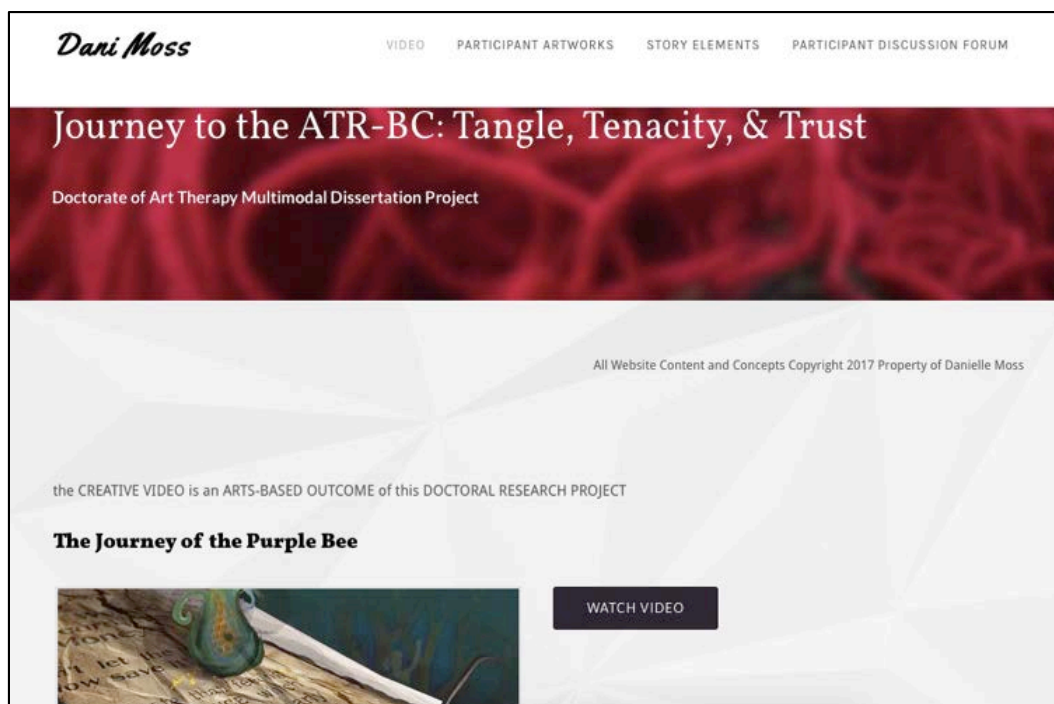


Figure 14. Website Home Page

seemed like a natural fit because it is another way for a viewer to experience the outcome.

The art-based research process was emergent and nonlinear, which created challenges for me when writing about the outcomes. The outcomes invite discussion, projection, and catharsis, my purpose for the research question in the first place. The video story, "The Journey of the Purple Bee," housed on the home page of my website is about a new bumblebee embarking on the journey to the foraging patch. She receives specific instructions from her predecessors in the hive to follow the beeline and show proof of worthiness to gain entry. She makes the decision to collect red yarn and show it in the foraging patch. While following the red yarn, whether bureaucratic "red tape" or passion, the bee encounters a tangle. She makes the decision to unravel the tangle and encounters more trials and errors that call upon her tenacity and trust, but she forges forward. I attempted to convey the range of emotional experiences that the process held for participants. The trust that the central character must have is trust in herself and trust in the process of becoming an art therapist. She must know herself as the purple bee, the art therapist. She must know that her work has purpose and is effective. In the end, once she reaches the final setting, she reflects on her journey and her process. She asks herself if the tangle was in the way or on the way. Was the tangle a barrier to her success, or a necessary part of becoming successful?

The web page “Participant Artworks” houses all of the digital image files submitted by participants (Figure 15). On this page, I presented an analysis of the imagery, important quotes, and ideas that participants shared. I identified themes as well.

This web page reflects the tangible process discussed above. I felt that it was important to show where the imagery and themes emerged from, to recreate the process online for sharing and viewing. I believe that the richness of the individual art and words are important to be able to refer to after viewing the video. This is important because it may help viewers deepen discussion about specific elements in the video that might be universal and unique.

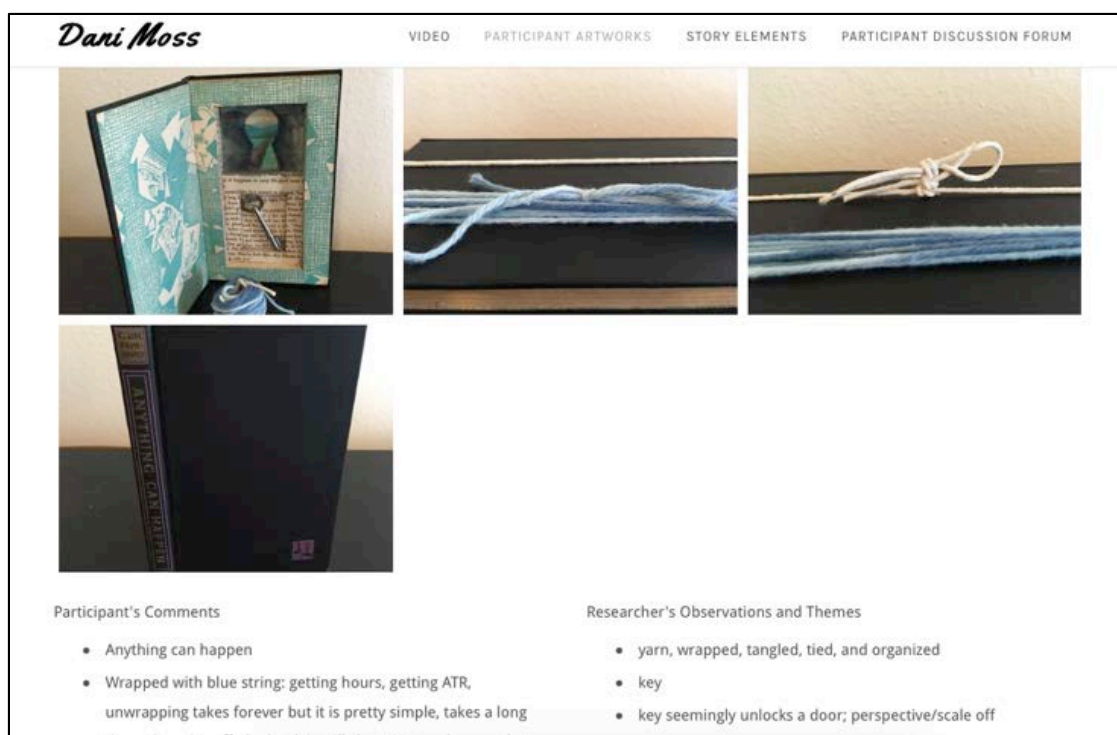



Figure 15. Participant Artworks Web Page, Showing Beatrix's Art

For example, one may notice in the first scene a brown envelope used as the road on which the bee leaves the hive. The envelope was from an image of Alice's artwork. Alice shared poignant associations with the envelope about the monetary value of the ATR-BC, and it may be a powerful topic of discussion for other art therapists who are weighing their investment.

The "Story Elements" web page includes information about the five key elements of the story, plot, characters, theme, conflict, and setting (Figure 16). Focusing on these five elements helped with data analysis because I could refine my arts-based story to have better logic.



characters

BUMBLEBEE

The newbie. The "ingenue."

Biological considerations: A bee is a pollinator. It lands on flowers and helps them bloom by moving pollen. It is fed by the pollen. They need each other. Bees participate in interspecies interactions which leads to survival and co-evolution.

How might the art therapist be like a bee? What is the flower, a client, a system, a community, etc.?

Bees live in networks, work together, and their network is an organism in and of itself. Pollinator bees launch and often work alone.

The majority of the bee colony is female. Bees return to the hive and use a dance called "the waggle dance" to give general directions to a good spot for foraging pollen. Foraging bees must angle toward the sun, find landmarks on the horizon, and fly in a general direction to find the flowers.

How is the "waggle dance" like art therapy training and guidelines?

Anatomy of a bee: A bee has multifaceted lens that allow it to see a spectrum of colors from ultraviolet to yellow, not red like the beeline yarn. The eyes allow for determination of shadow and light. Bees' bodies are too large to fly with their wings flapping up and down. Bees

WASP

Biological considerations: wasps are able to pollinate. Wasps are not considered "pollinators," though they do fly from flower to flower and eat pollen and nectar. At times, pollen sticks to their bodies and inadvertently they pollinate plants. There are a few species of wasps that co-evolved with plants and are the primary pollinators of that plant in a symbiotic relationship. Wasps are omnivores, meaning they eat other insects as well as plants.

Art therapists advocate to protect the public from untrained individuals

Figure 16. Story Elements Web Page, Showing Characters

CHAPTER 4: REFLECTIONS AND CONCLUSIONS

This research project and process was transformative for me. As a result of the interviewing, art making, reflecting, wrestling with the material, and reading large amounts of literature, I am better equipped and informed to work with art therapy students in graduate training. I can draw upon nearly any aspect of this research to provide guidance to art therapy students in training in the groups I supervise. Being well informed is important to me and I cherished every moment of this process. I was lucky enough to concurrently teach and supervise graduate art therapy students, which allowed me to share new knowledge about and with novice art therapists as I learned it. I incorporated their responses into my reflexive thinking about the various concepts and data I was working with. For example, I recalled the tattered, out of print hardback art therapy book I picked up at a used book sale a decade ago and carried with me during my time in graduate school. I liked the feel of history and I honored my predecessors' early debates about definitions of art therapy (Ulman, 1975) as I learned how to be an art therapist atop their shoulders. While writing my dissertation and working in the studio on my video, I discovered that one of my art therapy supervisees had chosen to artistically reconstruct that very book title as an expression of her process of becoming an art therapist in her internship. The experience caused me to reflect upon the process of putting theory into practice and new art therapists' use of foundation and construction of identity in the ever-changing world.

I found it interesting that participants in the study expressed exhaustion and difficulty in their art and in their words, yet their focus was on resiliency. There was a sense of acceptance of the journey, not a rumination on the challenges. Their confidence

and patience were inspiring to me. Their participation and the ways in which they participated modeled for incoming art therapists how art therapists might approach this difficult journey.

I found it fascinating to encounter an online world that has powerful potential for promoting and presenting art therapists and their profession to society. Here was an implicit place to find a pulse on art therapy. How do art therapists know of this sort of need to be connected online? Where in the process of art therapy professional socialization do members receive the message of how important social networking and staying updated is? It seems to be implicit knowledge that social media is commonplace for connecting. What happens if not all art therapists use online methods of connecting, update their social media statuses, or check the feeds and blogs of many of their peers? Unconnected art therapists may miss crucial information. I encountered online personas that might contribute to art therapists' collective identity. I wondered if art therapists are aware of this implicit professional norm in the art therapy culture and whether they may not understand their impact on collective art therapy professional identity. Are these art therapists aware that what they contribute may directly impact how the public perceives the profession? Do art therapists have a responsibility to the profession to be aware of what they present as online? This could be an area for future research.

All aspects of this project were rewarding. Sometimes the process was quite challenging, though I am excited to have engaged in art therapy research regarding a topic I am passionate about. The various stages of actualizing the study, along with my personal grappling with philosophical research paradigms and procedures, resulted in a deeper understanding of research in general. This deeper understanding affected my

relationship with the scholarly body of knowledge that currently exists in the social sciences and humanities. I believe that I am more clearly oriented in the literature, and therefore will be a more effective practitioner and educator. The experience with research also instilled motivation to continue to research questions and topics of interest in the art therapy profession. All the preparation leading to and the completion of this study along marks the beginning of a new personal stage in my professional identity as an art therapist.

I hope that the video and website provides new art therapists, art therapy educators and supervisors with a thoughtful starting point for discussion about their journeys to becoming credentialed. The video offers rich research-based metaphors, ideal imagery and real imagery to hang their experiences on to construct an inner roadmap for the ambiguous unknown. I hope that art therapists are able to endure the challenges and know that they are normal. The journey can't be skipped, patience and compassion are essential. Credentialing is a wonderful professional goal, but so is learning to believe in one's self and permitting their inevitable transformation. Their hard work and sometimes painful experiences may lead them to a rewarding life as art therapists if they stay the course and always remember what they love about this work.

Conclusions

Now, with some time and distance from the research, I have been able to put the findings into greater perspective., I am able to see that the hermeneutic-phenomenological immersion and arts-based processes had absorbed me; I was too close to the project to articulate its impact and future direction. Therefore, on the recommendation of my doctoral committee, I reflected upon the outcome as an emergent

phenomenon, the literature review and the components of the project as a system, and the implications the results may have upon the art therapy profession.

Reflection of the Outcome

The outcome of this study could be described as only one emergent possibility among many. The data had potential to emerge in many ways, and the results were possibly influenced by one moment in time. Since creating the film and website and writing the results, I entertained the thought, “What if I had followed the art from different entry points or used different media?” Endless possibilities could have resulted. This is a curious component of art-based research and I am fascinated by what may have influenced me to follow the trail that I followed.

Being new to the role of researcher could have obscured my awareness of the inherent creative potential in arts-based data analysis. Yet it is possible that my experience as a novice researcher granted a more authentic or even necessary result because it forced me to depend upon my intuition. I also depended on the guidance of my experienced committee members, in ways that are similar to the new therapist who is dependent on external reinforcement while they navigate uncharted terrain. Many times, and throughout the process, I identified with concepts in the literature regarding the trying on of new professional roles. Now I wonder what would have happened had the study been executed with greater research experience. In fact, the research process only opened me up to more questions and this study may be the beginning of a longer exploration.

When I was beginning to discover my purpose for my study, I cautioned myself about the use of a single metaphor to describe the period between graduation and

obtaining professional art therapy credentials. However, the emergent outcome drew me to one story. Thus, I wonder what limitations will present when I disseminate the information and various audiences interact with the single story. Will they find it encompassing enough or will other permutations become visible? This phenomenon alone warrants further iterations of my phenomenological arts-based research process with new participants. What might a whole series of arts-based outcomes portray?

I am pleased to have followed my artistically guided intuition, by which I found myself crossing the border of the qualitative research paradigm and into arts-based analysis. Having done so, I feel the study results promote an emergent research paradigm. I discovered a serious and important relationship with arts-based research, and the value and place it might have in the social sciences.

The conduct of much of this doctoral research project required me to have the courage to “bee” —a serious yet playful pun that I found myself saying over and again at each turn of the project. I am an advocate for the art therapy profession, hence my research purpose; with advocating art therapy comes trust that art stands on its own as having therapeutic value. I feel I remained devoted to the creative process, trusting that it was a guide and that the research results would have professional, serious value. One might critique that my project results are not serious because they are in the form of amateur digital animation and cartoons with anthropomorphized insects as the characters. However, the responses of the professionals who participated in my study reported that upon viewing the video they felt a sense of validation and connection. These professionals shared real, personal stories, and their approval of this video project proves that playful, creative allegory and metaphor can address very important issues.

Implications for Future Research

As I conclude the project, I am drawn to revisit the literature review; it inspires me to study concepts that I had initially presented now in more depth. For example, the concepts of “metaphor” and “allegory” could become a theoretical and practice exploration all their own, as would be deeper exploration of the use of fables as teaching tools. I am also inspired to explore professional development much more thoroughly, specifically the period of adolescence and identity formation and how the new professional’s developmental experience mimics the period. I would like to learn more about young adulthood as a developmental stage, which is a topic of discussion I encountered in professional literature.

Another potentially important implication regards how student loans might affect art therapists’ personal development. Could a recreation of this project illuminate new information about art therapy graduates’ experiences of launching into the workplace with mountains of debt be useful to the art therapy profession? Another area with important implications for the field are the familial relationships of art therapists as they affect professional development, given that much of the developmental crisis requires self-acceptance in relation to others. What are the differences in development between second career new art therapists and first career young adult new professional art therapists? Finally, future research might explore the concept of professional socialization and how educators prepare students to embody the values of the profession.

Relationship of the Creative Project Components

Phenomenologically, the various components of this research project—a video, a website, and an essay—can be understood as acting as nodes in a system. The nodes are

in relationship with one another; each part of the project has individual implications, yet the parts are dependent upon one another and together they create a larger context in which the journey of credentialing is located. Questions emerged for me about how one might use these components and how I will disseminate the information.

The video is the center or crux of the research project, with heavy use of allegory and imagery as metaphor. The video contains my re-storied script, which I narrated and presented through my research-informed, subjective lens. The data are captured in the form of symbol and language. Once I completed the video, it stood on its own as the container of all the data. That is, I had synthesized and distilled the data into one, cohesive art piece. However, the video cannot be said to stand alone without the context of the essay to moor the product in the art therapy discourse on professional development as a crisis for novice art therapists. The literature and description of its emergence in this contextual essay bring attention to significant details of importance.

As a third node, the website component of this project is a “home” where the video “lives” among data. I felt that by housing it online, audiences can view each participant’s art piece and then explore some of its origin. For example, I included images of participants’ original artworks, which I Photoshopped into the video scenery. Audiences may search through participants’ direct quotes from the interviews and either make the connection to where it appeared in the video or use the information to stimulate more reflection or discussion. I foresee that the video could be used in the future by art therapy supervisors, whether in educational settings or post-educational supervision groups.

The website is a work in progress. In addition to housing the video, I included pages with participant imagery and quotes, methodology, and exploration of the components of the story (plot, theme, characters, conflict, and setting). I designed the website with a vision that audiences would interact with and explore the study and with each other as an affinity group that is interested in the topic. I included a blog page that I have yet to determine its purpose, but hope that it will serve in this role of interaction in some way. As of now, the website is a vehicle that contains the creative features of my project, which I feel deserve more development. For example, I embarked on the research because I wanted to normalize the journey of becoming an art therapist, and I feel the website is not explicit about such an intention. Although the website is waiting for its live debut and a vehicle with great potential for easy dissemination, it is not yet refined. I believe that its contents eventually will be useful for those in training or post education supervision once I have presented the material clearly and as fully developed.

Implications for the Art Therapy Profession

Among the implications for the art therapy profession, one concerning consensus from the participants was that some professionals continue to question the value of the ATR-BC as a highest credential for art therapists. I did not set out to study the importance of this credential, but valuable information emerged from the participants' perspectives. Participants reported that they viewed the credential as more of a personal goal, achieved because they were personally motivated to solidify their professional identity. Some disclosed that they felt the ATR-BC was important only within the art therapy profession, recognized mostly by other art therapists. Some had obtained the credential because they needed to professionalize themselves in art therapy educational

settings in order to be an educator of art therapy. Others reported that although the credential was not always recognized in workplace settings, in time it did bring them professional status that they did not have before. Some reported that part of their motivation for obtaining the ATR-BC was to act as an advocate for the art therapy profession.

All participants expressed a sentiment that they had sacrificed time and money for the greater good of the profession. This research study, therefore, could help promote dialogue among art therapy professionals about their significance as members of the profession, and that “a call to action” or “we need your support” from the professional organization or its members is addressing them directly. Leaders in art therapy professional organizations and credentialing bodies can better respond if they learn their members’ views. Promoting open discussion about important personal experiences and perceptions may help the stakeholders who are involved with issues of credentialing and professional licensing navigate decision making that affect art therapists’ professional practice.

This research study also has implications regarding professional socialization in art therapy. Professional socialization is a responsibility of the educator and the educational programs, and it is during supervision that professional socialization most greatly occurs (Holland, 1999; Studer, 2007). One such value worth discussing is how one might perceive being a member of the art therapy profession, as Feen-Calligan (2000) posed. She was concerned about art therapists entering the profession with a sense of entitlement, as in “‘What can the profession do for me?’ versus ‘What can I do with my education and talents that will make the world a better place and still allow me to pay

my bills?’” (Feen-Calligan, 2000, p. 83). My hope is that with normalization, as depicted in this study’s outcomes,, art therapists might be better prepared to enter into the reality that the art therapy profession is not easy, which I see as knowledge that can combat resentment or unrealistic ideals.

Finally, I want to draw attention to the importance of art therapy preparation, whether the educational training program or supervision. Supervision specifically seems to key in developing as an art therapist. Are art therapy supervisors aware that disillusionment is a normal part of professional development, as documented in the helping professions? Supervisors may be able to use the video and other components of the website with their students and supervisees to promote discussion about the challenges of becoming an art therapist. Supervisors, according to the professional literature, are encouraged to normalize disillusionment. The future of the art therapy profession may be influenced by newcomers’ efforts to achieve unrealistic ideals. Thus, it seems that supervisors have a responsibility to the integrity of the profession to work with newcomers’ disillusionment.

An unexpected result of this study is that I named the period between graduation from art therapy training and obtaining the ATR-BC, the *professional developmental crisis*. If art therapists understand this period as such, experienced, master art therapists might better able guide, comfort, challenge, teach, and support those on their journey. My work is not unique to art therapists, suggesting that art therapy was a starting point. However, many new professionals actually experience a *professional developmental crisis*. Though my plan for dissemination is not yet fully in focus, I hope to open this research beyond art therapists as I believe this knowledge may be of use for other

professions. Once I develop clearer supplemental information to accompany the creative video, offering a workshop or presentation to professionals in allied health disciplines will hopefully promote discussion about the implications of the professional developmental crisis for newcomers. Not only will broadening my audience stimulate discussion about this important topic, but it will also advocate for the field of art therapy and inform those who work with art therapists how they can support having art therapists in their organizations.

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APPENDIX A

E-Mail Announcement Inviting Participant Referrals

Dear Colleagues:

A doctoral student at Mount Mary University, I would like to let you know about a research study that may be of interest to your former clinical art therapy supervisees, former art therapy students, and current art therapy colleagues and ask you to consider referring them for possible participation. Please feel free to forward this email to professional art therapists whom you think may be interested.

The purpose of this study is to investigate art therapists' developmental experiences between graduating from graduate training and entry into the art therapy profession as newly board-certified, credentialed professionals. The data from this study will inform the art therapy profession regarding the implications of an important developmental transition. If more information is known of the developmental transition, then the art therapy profession (i.e., new art therapists, students, art therapy educators and, supervisors), employers, and other stakeholders can prepare for and normalize experiences.

Art therapists who meet the following criteria may be eligible:

Professional art therapists who obtained their full art therapy credentials (ATR-BC) no earlier than the year 2015.

I look forward to speaking with individuals from your professional network who may be interested in participating in this study. Please feel free to contact me with questions, or have interested professional art therapists contact me themselves, using the contact information provided below.

Thank you for your time and consideration.

Sincerely,

Danielle Moss, ATR-BC, LPC

Doctoral Student, Dani Moss, ATR-BC, LPC at [phone; email]

Primary Advisor: Dr. Lynn Kapitan [email]

Mount Mary University IRB: Maureen Leonard, Chair of the IRB at [email]

APPENDIX B**E-Mail Invitation Inviting Participation in the Study**

Dear Colleague,

Thank you for your interest in my arts-based, phenomenological research study about the journey to becoming a fully credentialed art therapist. Congratulations on your recent achievement of the ATR-BC!

Please review the consent materials that are attached in this email.

If you would like to agree to participate, please reply to this email indicating that you agree or not.

Your response indicates that you have read and agree (or do not agree) to:

- 1) Consent to participate
- 2) Group confidentiality
- 3) Have read the debriefing statement

If you choose to participate, you will be asked to:

- touch base with me via phone/video conference so that I can explain the study
- make art about your journey from graduation to obtaining your ATR-BC
- send me a photo of the art image via email ([email])
- schedule a phone/video conference interview to discuss your art
- view my final video and participate in an online focus group discussion

I look forward to your response.

Sincerely,

Dani Moss, ATR-BC, LPC

Art making and semi-structured, open interview questions:

1. Art: Make an image that captures the essence of your experience between graduating and becoming credentialed and identifying as a professional art therapist.
2. While studying this image, tell me a story through metaphor about your experience of becoming credentialed and identifying as an art therapist, starting from when you graduated from your art therapy training program.

APPENDIX C**Informed Consent Form**

CONSENT TO PARTICIPATE IN RESEARCH

Project Title: What are the Contemporary Characteristics of the Transitions from Graduate Student to Professional Art Therapist?

Researcher/Faculty: *Danielle Moss, ATR-BC, LPC*

Introduction:

You are being asked to take part in a research study being conducted by student, Danielle Moss, ATR-BC, LPC, for a doctoral class project under the supervision of (Mount Mary University Advisor) Lynn Kapitan, PhD, ATR-BC, HLM.

Please read this form carefully and ask any questions you may have before deciding whether to participate in the study.

Purpose:

I understand that the purpose of this study is to investigate the developmental experiences newly board-certified art therapists have between entry into the art therapy profession upon graduating from graduate training and attaining their professional credentials. The data from this study will inform the art therapy profession regarding the implications of an important developmental transition. If the profession (i.e., new art therapists, students, art therapy educators and, supervisors), employers, and other stakeholders know what is a typical career trajectory for new graduates, then they can normalize what graduates can expect on the journey between graduation and professional credentialing.

Procedures:

By agreeing to be in the study, I agree to participate in the following:

- To make art in response to a prompt about my experiences (from graduation to credentialing).
- To verbally share reflections about the meanings in my art, both individually with the researcher and during a focus group interview with other participants (via electronic video conferencing if I cannot attend in person).
- To answer semi-structured questions regarding my personal opinions and experiences of relevant professional issues. These responses may be personal and emotional as they relate to my transition from graduate to a professional, credentialed art therapist.
- To allow an electronic, photograph(s) of my art image(s) be collected from me, to be used in data analysis.
- To allow audio recordings and transcriptions of my responses to be used for the purpose of gathering and analyzing data accurately.
- To allow my art and story be used creatively by the researcher as inspirational material in a film that re-contextualizes my experience and the experiences of other participants, provided that I have screened the film and have approved of any material that I may have provided.

Risks/Benefits:

Potential risks: I am aware that experiences of transition and professional identity formation are unique and personal, and may stir difficult emotions or challenge perceptions of efficacy. Referral for therapeutic services will be provided if needed or requested. Reasonable precautions will be made to protect my personal direct identifiers including coding, no use of personal information, and secured file storage. I am aware that it is possible that some indirect identification could be exposed due to the fact that the art therapy profession is small and there are limits to group confidentiality. The data collected during group discussion will not be anonymous. However, I have been assured that there are no other foreseeable risks involved in participating in this research beyond those experienced in everyday life.

Potential indirect identifiers could include:

- Detailed geographical information
- Organizations, educational programs, exact occupations
- Dates of individually identifying events such as birthdates, employment dates

Potential benefits:

As a participant, I may feel supported and learn that some of my experiences of transition from trainee to credentialed professional in art therapy are universal. This may be experienced as cathartic and normal. The results may help those who are interested in art therapy as a career in the future, so that they may have an accurate understanding of what to expect. The results may also help to inform non-art therapists about the experiences of new professionals, potentially strengthening the professional at large.

Compensation: None. Researcher may provide refreshments during the focus group meetings if held locally and in person.

Confidentiality:

Data includes photographs of participants' art imagery, recordings of interviews/group discussions, transcribed interviews/group discussions, consents and other documentation stored in PDF form, and in the form of the final video. The final video will be used for disseminating the results of the study to an audience. The audience is other art therapists, art therapy educators, art therapy supervisors, and other interested stakeholders who will benefit from understanding the journey of transition.

Data collected is not anonymous because of the focus group discussions and group storytelling, but confidentiality will be maintained by changing names and using pseudonyms when reporting the findings. Data will be analyzed using structured arts-based analysis and coding of participants and transcripts. Any direct identifying information, such as names, will be obscured or eliminated in order to protect participants' information. Electronic data will be protected by using encrypted and password protected electronic files (images, documents, recordings, email correspondences). Data will be stored in an encrypted electronic cloud file storage folder during and after the course of the study. Paper files with personal contact information, paper artworks, or any non-electronic documents pertaining to the study will be kept in a locked file box designed to protect contents from water and fire damage. The box will be

stored in the researcher's locked faculty office, and may travel to her personal office where it will be stored in a locked cabinet. Paper files will be saved as PDFs and stored in an encrypted electronic file once the study has ended, the originals destroyed.

Voluntary Participation:

I am aware that participation in this study is voluntary. If I do not want to be in this study, I may choose not to participate. Even if I decide to participate, I am free not to answer any question or to withdraw from participation at any time without penalty.

Contacts and Questions:

Any questions about this research project or interview can be direct to the researcher or advising faculty member: Researcher: Danielle Moss, [email; phone]; Faculty Advisor: Dr. Lynn Kapitan [email]

Any questions about my rights as a research participant may be directed to Mount Mary University (IRB Chair, Maureen Leonard, at [email])

Statement of Consent:

My signature below indicates that I have read and understood the information provided above, have had an opportunity to ask questions, and agree to participate in this research study. I will be given a copy of this form to keep for my records.

Participant's Signature

Date

Researcher's Signature

Date

APPENDIX D**Debriefing Statement**

DEBRIEFING STATEMENT

Thank you for participating in my research today! You were selected as a potential participant because you are a newly credentialed professional art therapist. You have obtained your Art Therapy Board-Certification (Congratulations!) no earlier than the year 2015.

Purpose of the Study:

I understand that the purpose of this study is to investigate the developmental experiences newly board-certified art therapists have between entry into the art therapy profession upon graduating from graduate training and attaining their professional credentials. The data from this study will inform the art therapy profession regarding the implications of an important developmental transition. If the profession (i.e., new art therapists, students, art therapy educators and, supervisors), employers, and other stakeholders know what is a typical career trajectory for new graduates, then they can normalize what graduates can expect on the journey between graduation and professional credentialing.

Confidentiality:

Data collected is not anonymous, but will be kept confidential by using pseudonyms when reporting the findings, and no identifying personal information will be attached to the data. Confidentiality will be protected by using encrypted and password protected electronic files (images, documents, recordings, email correspondences). The focus group component of this study affects anonymity in that it cannot be guaranteed.

Contacts and Questions:

If you have questions about this research project or interview, feel free to contact Doctoral Student, Dani Moss, ATR-BC, LPC at [***-***-****; email].
 Primary Advisor: Dr. Lynn Kapitan [email].
 Mount Mary University IRB: Maureen Leonard, Chair of the IRB at [email].

If you have any questions or concerns regarding this study, your rights as a participant, or you would like to talk to someone other than the researcher(s), you are encouraged to contact the Mount Mary University Internal Review Board: Maureen Leonard, Chair of the IRB at [email].

If you would like to know the results of the study, please sign this sheet (see below) and return it to Dani Moss.

Please sign up to receive information about the study

Delivery method (please check) _____ e-mail address

_____ mail address

_____ Other

APPENDIX E**Group Confidentiality Statement**

Investigating Art Therapists Becoming Credentialed

Group Confidentiality Statement

The purpose of the focus group discussion is to verbally share reflections about the meanings in my art with the researcher and other participants (via electronic video conferencing if I cannot attend in person). In the focus group participants will be asked to answer semi-structured questions regarding personal opinions and experiences of relevant professional issues. These responses may be personal and emotional as they relate to transition from graduate to a professional, credentialed art therapist.

I _____, agree to maintain confidentiality of the topics and questions discussed in the focus group meetings. I understand that confidentiality is limited due to the nature of group participation. While the data that is collected is not anonymous, the information will be obscured with pseudonyms for confidentiality.

If I would like to participate, but do not feel comfortable in a group setting, I may request in writing to participate in a one on one basis (email the researcher, Dani Moss at [email]).

Signed,

Participant signature

Date

APPENDIX F
Confidentiality Form for Interrater Group Participation

Please reply to this email that you accept the terms of this contract for participation:
 I agree to maintain confidentiality of this research project including all data (participant art, narrative, information) and the interactions with the research team and researcher.
 Use of the participant artwork and narratives is strictly for the purpose of the research project with which I am volunteering. I am not a research participant or a researcher.

I understand that this is a volunteer position and I can withdraw from the team at any time, but I will notify the researcher in writing. I understand that I am assisting Dani Moss with her doctoral research for fulfillment of her dissertation. At this time, my name will only be included in video credits in her video project. The final project belongs to Dani Moss.

The researcher is asking of my time and efforts, tasks such as:

1. Watch, listen to interviews, take notes, respond with art
2. Look at art, listen for metaphors
3. Collaborate under Dani's direction with other volunteers to make art and share ideas
4. Make art to bring the vision alive (Directed by the researcher, Dani)
5. Record and photograph the process for use in the project only
6. Record the video footage
7. Edit video footage