

Senate Bill 238

September 22, 2020

Dear Chairman McColley and the members of the Transportation, Commerce, and Workforce Committee,

Please accept this letter in support of Senate Bill 238.

My name is Jen McHale. I have been a practicing art therapist for 22 years in Ohio. I graduated with my Masters of Science in Art Psychotherapy from Eastern Virginia Medical School in Norfolk, Virginia. My work has ranged from foster care, psychiatric care, and senior living/Alzheimer/dementia care. I am currently employed at The Bing Cancer Center/Riverside Methodist Hospital directing the Arts in Medicine Program, which provides art therapy services to oncology patients and their families. I am grateful for the amazing experiences I have had as an art therapist over the years, but there have been drawbacks professionally, and it primarily stems from not having licensure.

Art therapists have been striving for licensure for decades. Unfortunately, for numerous reasons it has not been accomplished. I honestly can't give a clear reason, but my understanding it is due other mental health boards opposition to it. I believe we all have the same goal...to help people who are in need of mental health support. This makes no sense to me as art therapist are a small group of mental health providers in the State of Ohio. Art therapists have extensive training to provide an often-effective modality to those in need of help. In order to practice art therapy, you must graduate from an accredited master level art therapy program which includes coursework, clinical internships and completion of a research thesis. The SAME requirements a licensed counselor or social worker obtain from their accredited master's program. If you review the course work from any of these programs, they will be similar. Art therapists further learn and explore the depths of how the creative arts can be folded into the therapeutic process. Art therapists obtain a registration status post-graduation which involves supervised clinical hours by an art therapist who is board certified. Once an ATR (art therapy registered) is obtained, and art therapist is eligible to take the board certification exam that is an extensive examination not only specifically focused on art therapy techniques/processes, but includes theories, diagnostics/assessment, treatment planning and more. It has been explained it is similar to the exam counselors must take to obtain their LPCC (licensed professional certified counselor). I believe becoming licensed in the State of Ohio would open opportunities to help people more people.

The challenges of not having a licensure include: 1) Any person without proper training can say they can provide art therapy services, which can put patient care at risk. 2) Art therapists are not as employable because many agencies require a license to work so services can be billed through the insurance companies, and many employers are often mandated that an individual providing therapeutic mental health services possess a license. 3) Some people do not respond to "talk therapy", and other types of therapeutic approaches, such as art therapy, are too expensive for an individual to pay out of pocket cost due to not receiving assistance from their insurance company. Isn't the goal to find the right therapeutic process to assist a patient to strive for a more independent and healthy life?

Every job I have had in my 22 years of practicing art therapy, has not required a license. However, my compensation has been significantly lower compared to other master level licensed mental healthcare providers. I work with physicians, nurses, social workers, counselors, and chaplains. I value their expertise, and they in return value the services I provide the patients we care for. One example where art therapy played an important part of patient care involved a woman who had been hospitalized due to cancer treatment. She laid in bed day after day. Her hospitalization was approximately four months. Poor eating, depressed, in pain, and feeling hopeless. The healthcare team were uncertain if she would survive the grueling treatment she had to endure. She declined art therapy 10 times, but one day, she decided to engage in an art therapy session. She started with working with clay, but later became engrossed in painting, titling her finished paintings after how she was feeling that day. In her eyes, and many of the health care providers treating her, saw first-hand the power of art therapy in helping an individual. This patient was fearful of engaging in art therapy, but through the therapeutic rapport I encouraged, she built trust in not only in the therapist/patient relationship, but she began experiencing the benefits that art therapy offered her. She re-gained hope, felt empowered to fight her cancer, and remains a survivor to this day.

Art therapy is much more than playing with art materials, it is a balance between establishing a therapeutic rapport, recognizing treatment goals, and encouraging the individual to gain insight and coping skills. Art therapists want the opportunity to help others, but without a license we are limited in our scope of practice in the State of Ohio. Art therapists often leave the field due to the inability to make a decent living. I can attest as I left the field for 5 years due to poor pay, needing a better paying job while my husband attended medical school. It weighs heavy on my that art therapists are obtaining licensure in other states, but we remain “stuck” in the State of Ohio

In summary, as a community of art therapist, we have strived for licensure for decades to protect patients, obtain appropriate compensation, and continue to grow the field of art therapy. I appreciate your support of SB 238.

Sincerely,

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