

Choosing Art Therapy as a Career

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Abstract

Literature has indicated that there are many factors involved in career selection, including personality, family background, gender, cultural background, and values. This study was designed to investigate commonalities of individuals who pursued art therapy as a career. A questionnaire randomly distributed to 500 credentialed professional members of the American Art Therapy Association resulted in a 62% response rate. A majority of the respondents were Caucasian females around the age of 53 and most had become interested in the field of art therapy through a friend, by taking an academic class, or by talking with art therapists. It was also noted that art therapists tended to be listeners who had strong interpersonal skills and a desire to help others. The statistically significant results should be useful to career counselors and art therapy educators.

Art Therapy as a Career Choice

Career development has been widely researched and studied. However, very little research had been conducted on the individuals who choose art therapy as a career (DuBeau, 1994). What influenced their decision? What were their skills, interests, and values? What were they seeking in their career choice?

Holland (1985) clearly believes that personality and vocational choices are related. He has stated:

If vocational interests are construed as an expression of personality, then they represent the expression of personality in work, school subjects, hobbies, recreational activities, and preferences. In short, what we have called "vocational interests" are simply another aspect of personality. If vocational interests are an expression of personality, then it follows that interest inventories are personality inventories. (p. 7)

Hogan and Blake (1999) provided an explanation for the link between vocational interests and personality. Interests and personality measures are related in that both

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attempt to forecast occupational success. Vocational interest measures predict how much a person would like an occupation, whereas personality measures provide information about the social skills necessary to succeed in an occupation. Interest measures explore an individual's "goals, values, and aspirations—which define a person's identity" (Hogan & Blake, p. 54). Holland (1985) defined six vocational interest types: Realistic, Investigative, Artistic, Social, Enterprising, and Conventional. Holland argued that vocational interest was an expression of personality. He described personality characteristics associated with each interest type. Carless (1999) summarized them as follows:

- (a) Realistic types are asocial, inflexible, practical, and unisightful;
- (b) Investigative types are analytical, curious, intellectual, introspective, rational, and unpopular;
- (c) Artistic types are imaginative, impulsive, introspective, nonconforming, and open;
- (d) Social types are social, empathetic, persuasive, and responsible;
- (e) Enterprising types are ambitious, agreeable, extroverted, and self-confident;
- (f) Conventional types are conforming, inflexible, orderly, persistent, and practical. (p. 127)

Just as career development is influenced by one's parents, it is also influenced by birth order (Seligman, 1994). Adler (1931) was interested in the role and position of each child within the family. He viewed oldest or firstborn children as typically responsible and achieving. Second or middle children were also expected to be ambitious, but their ambitions were often hindered by the idea that they could not surpass their older siblings. As a result, secondborns typically chose to pursue an area that was very different from what their siblings had chosen to avoid being in direct competition. Bradley (1982) conducted a study related to birth order and found female firstborns were underrepresented in artistic and creative occupations. On the other hand, secondborns were overrepresented in artistic and creative occupations. He also reported that male firstborns were underrepresented in music and social service. Using Holland's (1985) occupational types, researchers found that men were more likely to prefer Realistic, Investigative, and Enterprising occupations, whereas women preferred Social, Artistic, and Conventional occupations (Gottfredson, Holland, & Gottfredson, 1975).

To understand how career decisions are made, it is necessary to look at studies involving related careers in the helping professions. Researchers suggest that therapists, at times, select their profession in an attempt to resolve personal psychological distress, to gratify unrecognized or

unresolved personal needs, or to work through issues pertaining to disturbance in their families of origin (Guy, Poelstra, & Stark, 1989; Henry, Sims, & Spray, 1971; Sussman, 1992).

The creative arts therapies are fairly recent additions to the healthcare field. Although theories of mental and physical therapy have existed for centuries, only in the last 70 years have healthcare professionals realized the healing powers of music, art, dance, and other forms of artistic self-expression. The past 4 decades have been a period of growth and professional development for art therapists. The American Art Therapy Association (AATA), founded in 1969, now includes over 5,500 members (Elkins, Stovall, & Malchiodi, 2003).

Research Method

Five hundred questionnaires (see the Appendix for a copy) were mailed to credentialed professional members of the AATA (randomly selected). A total of 312 questionnaires were completed and returned, yielding a 62% response rate. Each mailed survey was identified by a number to assist in the process of a follow-up mailing. As questionnaires were received, the data were entered onto a spreadsheet. Another questionnaire and an additional letter of encouragement to participate were mailed to those who had not responded within 2 months. Literature on follow-up mailings suggests that this is an effective method for increasing return rates in mail surveys (Babbie, 2001; Bourque & Fielder, 1995; Suskie, 1996).

The instrument used in this study was a questionnaire developed by this author. It comprised 32 questions designed to gather general and specific information regarding each individual's decision to become an art therapist, as well as to identify personal characteristics. These factors included demographic characteristics, personality traits, family involvement, and interests. Frequencies, means, chi-squares, correlations, and *t* tests were used to analyze the data.

Results

Demographic Information

The descriptive data obtained regarding survey participants follow. In terms of gender, 93.2% were female and 6.8% were male. This information parallels the demographic data found by Elkins et al. (2003) in their survey, which drew from the overall membership of the AATA. Age was reported by 96.8% of the respondents and ranged from 38 to 78 with an average age of 53.0 years (*SD* = 8.7). From these data, it is evident that younger art therapists are missing from the sample. Additionally, representatives of recently registered art therapists (ATRs) are also missing. This is again similar to the membership survey by Elkins et al., which found that over two-thirds reported having at least 6 years of art therapy experience. The current questionnaire showed that the minimum number of years in the field was 7 and the maximum was 41 with a mean of 22.3 (*SD* = 4.6). On average, males reported being in the

field longer (*M* = 25.6 years, *SD* = 6.1) than did females (*M* = 22.1 years, *SD* = 4.4), a statistically significant difference (*t* = -2.5, *p* = .02).

A high percentage (94.8%) of the respondents classified themselves as Caucasian. The other respondents were divided among the remaining ethnic group choices: African descent (0.7%), Asian descent (1.0%), Hispanic (0.7%), other (2.0%), and more than one ethnic background (1.0%). Due to a significantly larger response from Caucasians, there was not enough data to gather specific information in relation to any another ethnicity. These data also reflect the typical ethnic make-up of the AATA membership (Elkins et al., 2003).

A large number of respondents reported having a master's degree (94.5%) with the majority of these reporting degrees in art therapy (65.3%). The remainder reported master's degrees in art education (2.8%), psychology (2.4%), various other disciplines (7.3%), and more than one discipline (22.2%). Interestingly, more respondents reported having master's degrees than bachelor's degrees (72.3%). The questionnaire stated, "Please mark all that apply"; therefore, it is logical to think that the number of bachelor's degrees should be at least as high as the number for master's degrees. This discrepancy may be due to respondents checking only the highest degree obtained or to the rare possibility of obtaining a master's degree without a bachelor's.

When asked about their level of education, respondents were also asked to specify their majors, minors, and specialties (Figures 1 and 2). Of the 70.0% who listed undergraduate majors, over one third (39.7%) were art majors and a relatively small number (7.8%) were psychology majors.

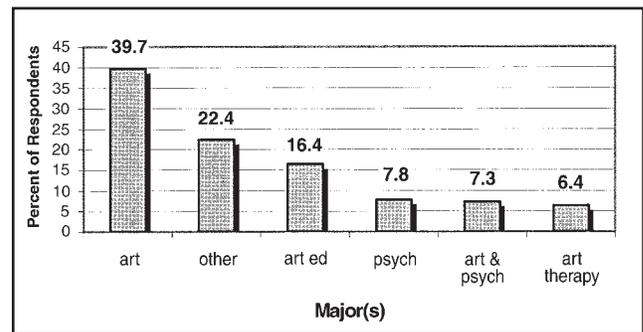


Figure 1 Undergraduate Majors

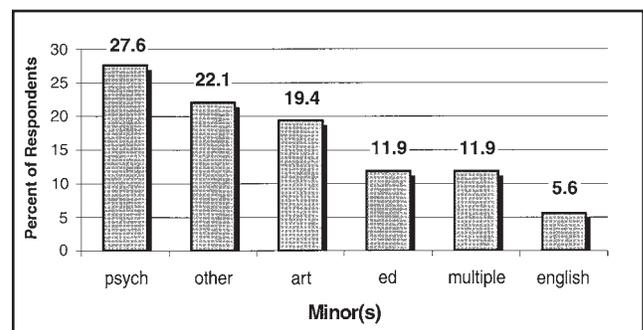


Figure 2 Undergraduate Minors

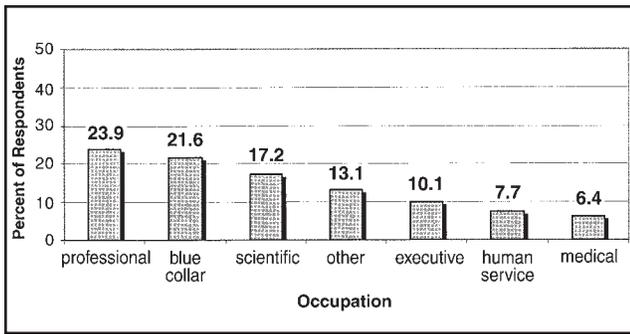


Figure 3 Father's Occupation

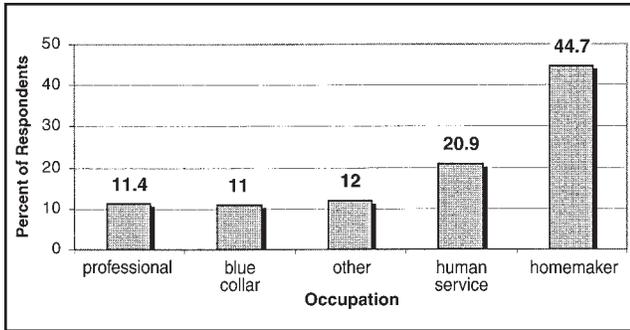


Figure 4 Mother's Occupation

Although it is not a traditional career, this may suggest that art therapy offers more structure and job security than being a fine artist. Majors listed as "other" included social work, art history, graphic communications, speech pathology, and education, as well as English, French, political science, business, and chemistry. Less than half (43.0%) listed their undergraduate minors. Psychology was listed most frequently with 27.6%. Some minors included in the "other" category were art therapy, art history, drama, health, philosophy, math, and anthropology.

Of the respondents who reported possessing more than one master's degree (22.2%), 81.3% listed having a master's in art therapy as one of them. Other master's degrees consisted of counseling, social work, fine arts, education, and business. Over one fifth of the respondents (20.6%) reported possessing a doctorate; these were in psychology (52.5%), art therapy (16.4%), and other (31.1%). Doctorates in art, art history, education, marriage and family therapy, Jungian analysis, human sexuality, interdisciplinary studies, ministry, and health policy and administration were placed in the "other" category because none of these reached a high enough percentage to be recorded separately.

Family Background

The birth order of respondents ranged from being an only child to being eighth. The most often reported number of children in the family of origin was two (34.9%). Almost two fifths of all respondents were the first born (39.7%) and over one third were the second (35.5%). Respondents were asked to report their parents' highest level of education. The most common answer for father's

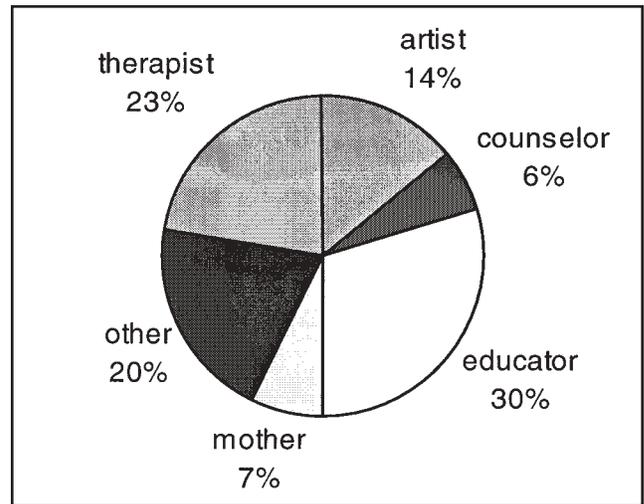


Figure 5 Other Current Careers

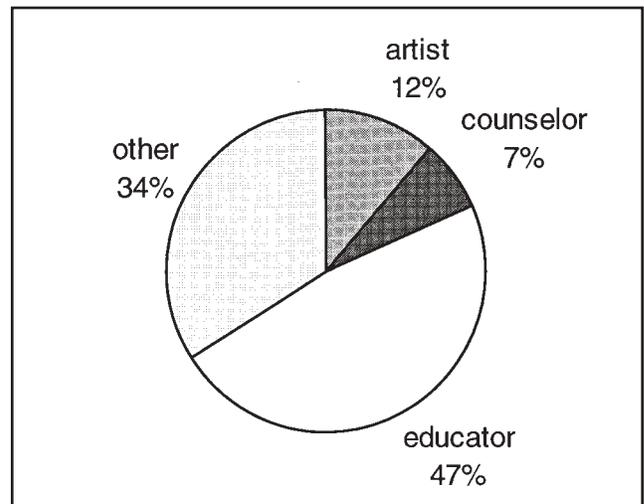


Figure 6 Previous Careers

education level was a bachelor's degree (28.1%). Although the highest percentage of mothers had completed only high school (36.2%), the percentage of mothers who received a bachelor's degree (27.0%) was close to the percentage reported for fathers. Figures 3 and 4 show the primary occupations of the respondents' parents. A significant number of respondents reported their mother's occupation to be a homemaker (44.7%).

Career History

Respondents were asked to identify their work status as full- or part-time. More reported part-time work (49.5%), although full-time work was a close second (40.9%). Enough reported that they were retired (4.8%) or not working or practicing (4.8%) to include these as separate categories. In response to the question, "Do you have another career?" 59.4% of all respondents marked "yes"; 40.6% marked "no." Asked to write down their second career (Figure 5), respondents (29.3%) most frequently listed the

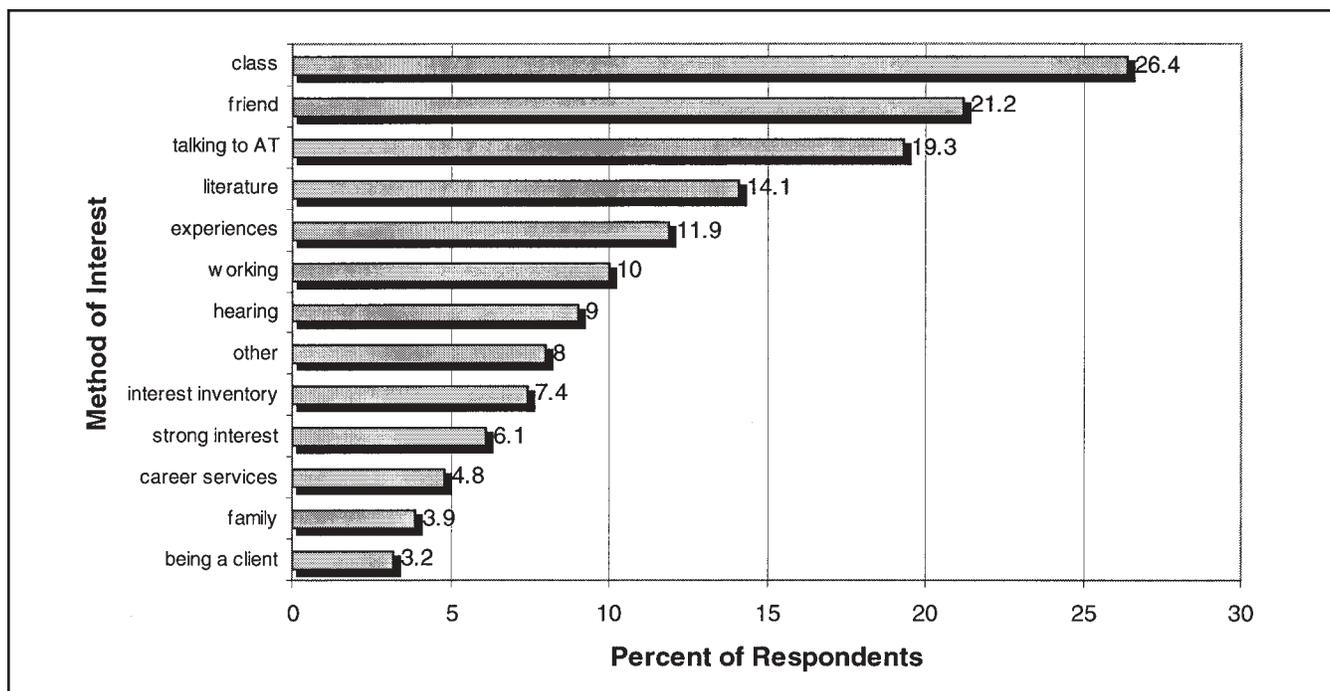


Figure 7 How Individuals Became Interested in Art Therapy

occupation of educator, Nurse, antique dealer, court investigator, administrator, program director, yoga instructor, farmer, and real estate agent were incorporated into the “other” category. Respondents were also asked if they had a career prior to becoming an art therapist. Slightly over half (55.6%) responded “yes.” Again, respondents were requested to name their previous careers (Figure 6). Among the 34.3% of jobs that fell into the “other” category were insurance sales, musician, writer, homemaker, sales clerk, seamstress, secretary, postal service, cab driver, nurse, medical technologist, child life specialist, and social worker.

Survey participants were asked to indicate how they became interested in art therapy (Figure 7). Due to frequency of response, four categories were added to those listed on the survey; these included “through literature/research,” “through experiences” (i.e., workshops, personally using art therapeutically, teaching, etc.), “hearing about art therapy,” and “having a strong interest in art and helping people.” Other ways people became interested were “an exhibit at GWU,” “I was asked to create an art therapy program,” “via music therapy,” and traveling. (The percentages in Figure 7 add up to more than 100% because respondents were asked to “mark all that apply.”)

The following data represent differences between the genders on this topic. A higher percentage of males (42.9%) selected “talking with art therapists” as a reason for becoming interested in art therapy than did females (17.6%) ($\chi^2 = 8.0, p = .005$). However, no males indicated literature or research as a way they became interested in art therapy whereas a number of females (15.2%) provided this reason ($\chi^2 = 3.7, p = .05$).

Personal Characteristics and Preferences

A majority of respondents selected being a listener (61.2%) over being a talker (11.2%). Additionally, 22.4% selected both and 5.3% marked other, which included being interactive, a doer, an observer, a witness, and a thinker. Participants were also given four pairs of different working conditions and asked to choose one from each pair. Fifty-six percent preferred being self-employed, 40.6% preferred working as an employee, and 3.5% selected both options. The distribution between doing things meticulously (49.1%) and doing things casually (48.0%) was nearly even, with a few marking both choices (2.9%). A vast majority (96.6%) selected being flexible versus being adamant (2.4%) or choosing both (1.0%). A high percentage of individuals preferred working with people (78.6%) rather than working alone (14.8%); 6.6% marked both options with the comment “depends on the situation.”

Fourteen items in the questionnaire incorporated various statements regarding one’s preferences and attitudes as an art therapist. Participants were asked to respond to each comment using a 5-point, Likert-type scale ranging from *strongly agree* to *strongly disagree*. The statements, mean scores, and standard deviations for each item are listed in Table 1. When the statements were compared by gender, “Art therapy offers a variety of settings in which to work” was the only one that achieved statistical significance ($t = -2.2, p = .04$). On average, females agreed more ($M = 1.7, SD = .85$) with this statement than males ($M = 2.2, SD = .88$).

Responses showed a significant correlation between art therapists who find client gratitude rewarding and those who value their parents’ approval when selecting a career

Table 1. Art Therapists' Preferences and Attitudes

| Statement | M | SD |
|--|------|------|
| As an art therapist, a job that is not routine is desirable. | 1.95 | 0.92 |
| As an art therapist, regular daytime hours and work schedule are desirable. | 2.09 | 0.98 |
| As an art therapist, being able to work in a loosely organized system is desirable. | 2.89 | 1.22 |
| As an art therapist, helping people is personally enjoyable. | 1.16 | 0.39 |
| As an art therapist, clients expressing gratitude for what is done for them is rewarding. | 2.05 | 0.74 |
| Art therapy offers a variety of settings in which to work. | 1.73 | 0.85 |
| Art therapy can provide a position in which one can feel in control. | 2.58 | 0.9 |
| There is an opportunity to influence others as an art therapist. | 1.85 | 0.68 |
| As an art therapist, I am able to problem solve through expressiveness and imagination. | 1.49 | 0.55 |
| I have intense motivation to achieve as an art therapist. | 2.25 | 0.9 |
| I am open to new ideas and experiences as an art therapist. | 1.45 | 0.52 |
| As an art therapist, I handle difficult situations in a practical and realistic fashion. | 1.45 | 0.67 |
| As an art therapist, I rely on thinking, gathering information, and careful analysis rather than my personal feelings. | 2.34 | 0.96 |
| Parental approval when choosing a career was important to me. | 3.55 | 1.99 |

($r = .25, p < .0001$). As one would expect, those who look for satisfaction from others also find parental approval important. Additionally, the responses suggested that art therapists' feelings of control are significantly related to influencing others ($r = .43, p < .0001$). This implies that if art therapists feel as though they have control, they also feel as though they have influence over others.

A greater number of respondents reported experiencing counseling or psychiatric treatment after leaving their family (78.8%) than reported experiencing treatment before leaving their family (14.9%). More males (30.0%) reported experiencing treatment before leaving their family than did females (13.8%) ($\chi^2 = 3.8, p = .05$). The result of comparing males (75.0%) and females (79.0%) who experienced therapy after leaving home was not statistically significant. Among the respondents who reported experiencing therapy before leaving home, a higher percentage became interested in art therapy by experiencing it as a client (62.5%) as opposed to those who had treatment later (13.6%) ($\chi^2 = 14.7, p = .0001$).

Respondents were asked to select one main reason for pursuing art therapy as a career. From among the options given, no one chose "status" or "job market trends." By far, the most commonly reported reason was "personality fit" (75.8%). Due to recurring answers, three new categories were developed: "interest in art and people," "self-discovery," and "passion toward the profession." Examples of other reasons listed were "I knew it was what God wanted me to do," "family issues," and "Dr. Viktor Lowenfeld" (Figure 8).

Respondents were asked to rank order a list of characteristics that the AATA (1999) indicates are qualities art therapists should possess. "Strong interpersonal skills"

(35.4%) and "desire to help others" (34.7%) were most frequently ranked as 1, suggesting these characteristics are the most common among art therapists. Figure 9 displays the frequency with which each characteristic was ranked as 1. (It should be noted that the percentages total more than 100% due to the fact that some respondents gave top ranking to more than one characteristic.)

Figure 10 reports the average ranking for each characteristic. Examining the data in this way provides information consistent with ranking frequency. For example, "strong interpersonal skills" had the lowest mean, showing it was the characteristic that was most frequently ranked first or that was the most representative.

Summary

A 32-question survey was randomly sent to 500 credentialed professional members of the AATA. Three hundred twelve surveys were returned and used in this study, yielding a response rate of 62.4%. Results showed that most respondents were females. The mean age of respondents was 53.0 with an average of 22.3 years in the field of art therapy. A high percentage was Caucasian, and a plurality reported having been undergraduate art majors before obtaining a master's in art therapy. Nearly half reported that they work part-time at art therapy while pursuing another career. Although there are many ways an individual becomes interested in art therapy, most noted this occurred through an academic class, a friend, or talking with art therapists. Results suggest that art therapists in general consider themselves listeners; they also prefer working with people, being self-employed, and being flexible. A

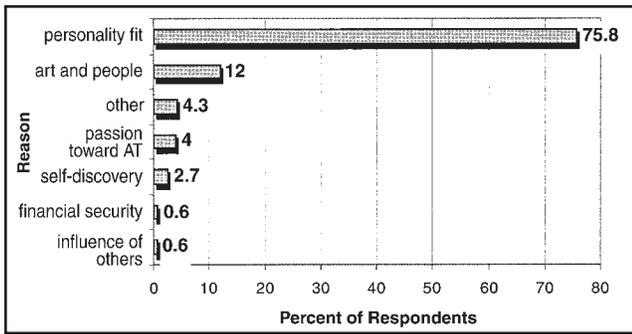


Figure 8

Main Reason for Choosing Art Therapy as a Career

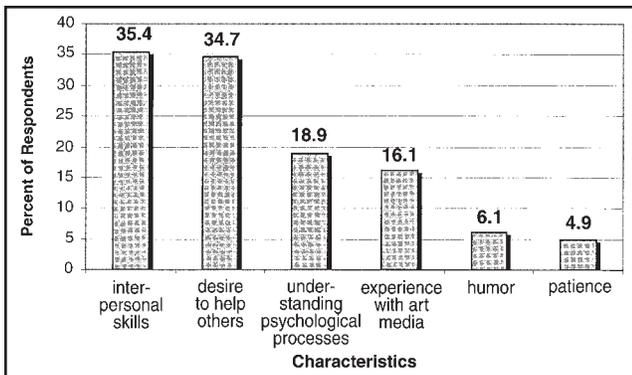


Figure 9 Personal Characteristics of an Art Therapist

majority of the respondents noted personality fit as the main reason for selecting art therapy as a career. Strong interpersonal skills and a desire to help others were the most representative characteristics of the art therapists who participated in the survey.

Implications and Conclusions

Career decisions are among the most important decisions an individual makes during his or her lifetime. This study investigated the factors involved in a person's decision to become an art therapist, as well as the personal characteristics and preferences of these individuals. The results of this study are useful for the field of career development and for the recruitment efforts of graduate art therapy programs. Data collected also identified attributes an individual in the field of art therapy tends to possess. Having a desire to help others was commonly reported among the respondents, which is also consistent with research conducted in related professions (Madigan, 1985; Murphy & Halgin, 1995; Rozier, Gilkeson, & Hamilton, 1992).

The literature reviewed (Bratcher, 1982; Palmer & Cochran, 1988) notes that parents can have a major influence on a person's career selection. Lucas's (1997) study reported that both men and women display the desire for parental approval and emotional support. Although this questionnaire did not specifically cover parental emotional support, it did address the need for parental approval. Contrary to the literature, a greater percentage disagreed (54.0%) than agreed (14.4%) with parental approval being

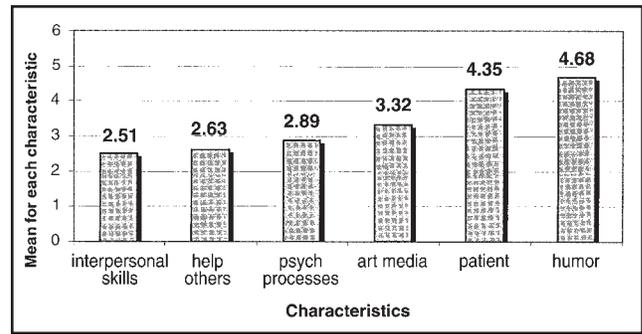


Figure 10 Average Ranking for Characteristics of an Art Therapist

important when choosing a career (31.5% were neutral). Interestingly, only a small percentage of fathers (7.7%) and a somewhat higher percentage of mothers (20.9%) had occupations in the human services. This suggests that art therapists are more independent than the average person when it comes to entering a relatively new field. Although they might still have had their parents' support, they were going into a field that could well have been unfamiliar to their parents.

A child's birth position within the family is also believed to influence career selection (Adler, 1931; Seligman, 1994). Although the literature (Bradley, 1982) pointed to more secondborns pursuing creative and artistic occupations, there was a slightly higher percentage of firstborns (39.7%) than of secondborns (35.5%) among the respondents. It is interesting, though, that over three fourths of the respondents (75.2%) were either first- or secondborns as opposed to other birth positions.

Previously, women would make a choice between having a family and having a career. However, more women today are balancing both a career and a family (Douce & Hansen, 1990). This appears to be the situation for female art therapists. Of the 59.4% who indicated having another career, 7.0% reported also being a mother. It is fascinating that 23.0% reported also being a therapist, suggesting this is different from being an art therapist.

A survey (Keller, Piotrowski, & Rabold, 1990) conducted among undergraduate students found that 45.0% selected a career based on personality match. Financial security and influence of others closely followed as incentives. Similarly, the present survey found that personality fit was the primary reason (75.8%) for pursuing art therapy as a career. However, financial security and influence of others were the least reported reasons (0.6% each). Although it is unclear what "personality fit" means, it may imply that personality traits, such as having a desire to help others and being creative, match the preferred characteristics of an art therapist. The most common personality characteristic seemed to be artistic inclinations with some suggestion of investigative and social characteristics. Because these characteristics were not directly reported, they can only be inferred from the information imbedded in various questions. It is also crucial to point out that this information cannot be generalized to Holland's (1985, 1997) vocational types.

When examining what influenced the career choice of clinical and social psychologists, Murphy and Halgin (1995) reported that many participants commented on their interest in and desire to help people. Studies conducted by Madigan (1985) and Rozier et al. (1992) indicated that occupational therapy students selected that field because they would be able to help others. Similarly, among art therapists, this study showed that 16.1% indicated having an interest in art and helping people as reasons for becoming interested in art therapy. Additionally, 34.7% reported having a desire to help others as their most representative characteristic.

It would be useful for career counselors to gain information regarding the field of art therapy. Only 4.8% of respondents reported utilizing career planning services, and no more than 7.4% noted using career interest inventories when exploring career options. Valuable information for career counselors is that 19.3% became interested in the field by talking to art therapists. Respondents reported that people, rather than publications, had a greater influence on their career choice. Therefore, having career centers provide professional art therapy contacts for students to shadow or interview may be beneficial. In this study, 42.9% of males indicated talking with art therapists as the way they became interested in art therapy. Word of mouth seems to be the best way for art therapy to gain recognition. Perhaps meeting with a working art therapist provides individuals with more knowledge about art therapy and validates it as a career option. As a majority of the respondents had undergraduate majors or minors in the areas of art and psychology, it would be a good idea for career counselors to suggest art therapy as a career option to individuals interested in these fields.

Data gathered from this study are also important for graduate art therapy programs. When distributing recruitment material or visiting undergraduate schools, art therapy programs will want to consider which academic departments have the greatest likelihood of student interest. Results from the study showed more subjects reported having an undergraduate major in art (39.7%) or art education (16.4%) than psychology (7.8%). However, the most frequently noted minor was psychology (27.6%). This suggests that most people seeking an art therapy master's degree have experience with art media but may need more education in the clinical aspects of art therapy (although art should still be incorporated in the curriculum). Additionally, 26.4% selected becoming interested in art therapy through an academic class. Due to the fact that this was the most frequently chosen option, perhaps graduate art therapy programs should look into offering introductory courses at the undergraduate level. Providing inservices, workshops, and art exhibits in the community will not only provide awareness but also spark interest in individuals. Providing recruitment material to the education field, particularly to art educators, could be key because many participants reported having been an educator. These respondents made comments such as "while student teaching I noticed pathology in artwork," "as an art educator I wanted more," and "working as a teacher I could easily see the value of art especially with special education children."

It is difficult to assess if the questionnaire was constructed in the best manner or has sufficient reliability. A number of limitations restrict the interpretation of the findings. Many questionnaires were filled out incompletely, and some respondents did not follow the directions. For example, when asked to mark all levels of education that apply, many just marked the highest level completed. It appears that the presumably random sample did not include younger art therapists or individuals who had recently become ATRs, which skewed the results.

It would be important to try to obtain information from a younger age group or those newer to the field, as well as to see how their career development compares to individuals who have been in the field longer. This could be done by surveying current art therapy graduate students or associate members of the AATA. It would be fascinating to see if there are any differences between the two groups. Additionally, future studies might concentrate on more specific topics related to career aspects of art therapy. These would include understanding the lack of cultural diversity among art therapy professionals and why so few males are drawn to the field of art therapy. From this study and the most recent membership survey (Elkins et al., 2003), it is evident that the profession has work to do with regard to diversity. Another suggestion would be to explore personality traits of art therapists, possibly using Holland's (1985, 1997) codes. As the field of art therapy continues to grow, career development increases in significance.

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Appendix Questionnaire

1. Gender: Male Female
2. Age: _____
3. Sibling position: (e.g., 1st of 3, 2nd of 2) _____ of _____
4. Ethnicity: African descent Caucasian American Indian Hispanic Asian descent
Other _____
5. Education: **Please mark all that apply.**
 Bachelor's Major(s) _____ Minor(s) _____
 Master's Please specify specialty: _____
 Doctorate Please specify specialty: _____
6. How long have you been an art therapist? _____ years
7. As an art therapist do you work: full-time part-time
8. Do you have another career?
 yes If yes, what is your other career? _____
 no
9. Have you had other careers prior to becoming an art therapist?
 yes If yes, what other career(s) have you had? _____
 no
10. How did you become interested in art therapy? **Please select all that apply.**
 through a friend experiencing art therapy as a client through family
 through career interest inventories taking an academic course utilizing career planning services
 talking with art therapists working in an art therapy setting other _____

Questionnaire continued on next page

Appendix Questionnaire (continued)

11. Would you consider yourself to be more of a: listener talker other _____
12. **Please select one from each of the following pairs.**
Which do you prefer more?
- a. being self-employed **versus** working as an employee
b. doing things meticulously **versus** doing things casually
c. being flexible **versus** being adamant
d. working with people **versus** working by yourself
13. As an art therapist, a job that is not routine is desirable.
- | strongly agree | agree | neutral | disagree | strongly disagree |
|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| <input type="checkbox"/> |
14. As an art therapist, regular daytime hours and work schedule are desirable.
15. As an art therapist, being able to work in a loosely organized system is desirable.
16. As an art therapist, helping people is personally enjoyable.
17. As an art therapist, clients expressing gratitude for what is done for them is rewarding.
18. Art therapy offers a variety of settings in which to work.
19. Art therapy can provide a position in which one can feel in control.
20. There is an opportunity to influence others as an art therapist.
21. As an art therapist, I am able to problem solve through expressiveness and imagination.
22. I have an intense motivation to achieve as an art therapist.
23. I am open to new ideas and experiences as an art therapist.
24. As an art therapist, I handle difficult situations in a practical and realistic fashion.
25. As an art therapist, I rely on thinking, gathering information, and careful analysis rather than my personal feelings.
26. Parental approval when choosing a career was important to me.
27. What is the **highest** level of education your parents have completed?
Father: _____ Mother: _____
28. What is/was the primary occupation of each parent?
Father: _____ Mother: _____
29. Before leaving your family of origin did you experience counseling or psychiatric treatment? yes no
30. After leaving your family of origin did you experience counseling or psychiatric treatment? yes no
31. What was the **main** reason for your decision to pursue art therapy as a career? **Please select one.**
 personality fit job market trends status financial security influence of others
 other _____
32. Please **rank order** these characteristics as they apply to you as an art therapist.
Rank the most representative as 1, the second most representative as 2, etc.
____ strong interpersonal skills
____ desire to help others
____ patient
____ understanding psychological processes
____ experience with art media
____ humor