Constructing Professional Identity in Art Therapy Through Service-Learning and Practica

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Abstract

Professional identity is a term used to describe both the collective identity of a profession and an individual’s own sense of the professional role. This article draws from the literature exploring professional identity with attention to the issues of developing professional identity in fields such as art therapy where lower wages, fewer jobs, and the frequent need to earn additional practice credentials exist. A qualitative research project was conducted during which students participated in service-learning in conjunction with an art therapy practicum assignment. Service-learning was introduced as a pedagogy to facilitate the identity construction of art therapy students, and was found to nurture aspects of professional identity described in the literature.

Introduction

In the Spring 2004 AATA Newsletter of the American Art Therapy Association [AATA], art therapist Susan Eastman described how in her experience, practicing art therapy meant obtaining licensure as a counselor. However, she realized, “If every art therapist took this approach our distinct field would be lost” (p. 4). In the same newsletter, AATA President Lynn Kapitan acknowledged the increasing number of art therapists who choose to complete additional coursework to obtain non-art therapy credentials to practice in the profession. Kapitan understands the “fear of being overrun, colonized or absorbed into other fields because there are no viable alternatives that would preserve our unique professional identity” (p. 2). She proposes “cross-training” that preserves professional identity in both art therapy and counseling and maintains, “Neither the professional identity nor the needed competencies in either field will be compromised” (p. 2). The proposed cross-training is not the subject of this article, at least not directly. This article is concerned with art therapists’ professional identity and how to develop and nurture it, particularly in light of such issues as cross-training.

Kapitan (2004) wrote, “The groundwork is already being laid…. [Actions include] upgrading the Educational Standards to meet both art therapy and professional counseling criteria” (p. 2). Because the development of professional identity begins formally in one’s professional education, it seems appropriate to explore how it might be affected by proposed changes in Education Standards, and furthermore, how professional identity might be addressed and strengthened in graduate programs.

This article outlines a preliminary research project that explored professional-identity construction during graduate art therapy education. As background, highlights from the literature related to art therapy professional identity are presented and some of the problems with developing professional identity are summarized. This article introduces service-learning and emphasizes how it can support identity construction in art therapy education when integrated with practica.

Art Therapy and Professional Identity

Professional identity is defined as a product of biography, personal choices, and social circumstances through which professionals begin to test and accept the traditions and obligations of a profession. Eventually, a professional self emerges that involves adopting an official role, which is assigned, and a professional identity, which is negotiated. Professional identity is correlated with mastery of knowledge and skills in a particular profession, and involves a deep and life-long commitment to that profession, developed as a result of being a member of a group with an ethos of its own (Mayhew, 1971; Rosaen & Schram, 1998; Stark, Lowther, & Hagerty, 1986).

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detailing the AATA ethics code and standards of practice. These documents represent the face art therapy presents to the world. Ault (1977) wrote:

I often hear of the ATR [registered art therapist] status being assumed as a measure of one’s professional competence. That is simply not so. That determination is made only when you have internalized the feeling of personal identity that the ATR status externally represents. The real issue that matters is the quality of the process as reflected in positive changes in yourself and in your patients. Always, that is and should be the bottom line in our consideration of these issues of professional identity. (p. 56)

Art therapy is not the only field concerned with professional identity. To all human service fields, professional identity is considered very important when the work of the profession involves close interaction with, and responsibility for, other human beings. What is involved in learning to become an art therapist, a doctor, or a nurse “is not simply the acquisition of skills, but an entire way of understanding the world, an epistemology, a set of values” (Glen, 1999, p. 208). Reviewing the literature on art therapy professional identity revealed six themes explored in the following paragraphs.

**Personal Identity**

The art therapist is a person first; there is an “intimate interplay between…personal inner development and… professional growth as an art therapist” (Robbins, 1982, p. 1). Many authors have mentioned the personal qualities thought to be important to art therapists: Levick (1995) identified compassion, empathy, and patience as building blocks of professional identity. The AATA brochure *Art Therapy: The Profession* (2001) lists personal qualifications first among the requirements to become an art therapist:

An art therapist must have sensitivity to human needs and expressions, emotional stability, patience, a capacity for insight into psychological processes, and an understanding of art media. An art therapist must also be an attentive listener, a keen observer, and be able to develop a rapport with people. Flexibility and a sense of humor are important. (p. 2)

The importance of personal awareness is underscored by McNiff (1986) who advocates understanding how personality and behavior affect clients and therapy. Moreover, the need to understand one’s values in order to be respectful of, and to work effectively with, others whose values differ from one’s own couldn’t be more important today (Cattaneo, 1994; Gonzalez-Dolginko, 2000).

**The Art Therapist’s Expertise**

Professional identity construction is considered analogous to developing expertise (Stark, Lowther, & Hagerty, 1986). The skills or expertise art therapists are expected to have—that is, skills agreed upon by members of the profession—are represented by the content of the standards for art therapy education and the Board Certification exam. As the profession has grown, so have the interpretations of and approaches to art therapy practice, resulting in a profession that some believe has become fragmented or too broad (Levick, 1995; Rhyne, 1994). Nonetheless, art therapists working in different settings often have very different ways of practicing art therapy (Vick, 1996).

Despite the variations in practice, it is important that the profession have some sense of cohesion (Hodnett, 1973). The unique skills of art therapists, as well as their ability to demonstrate their skills and expertise, are critical to the continued growth of the profession. For example, the professions of medicine, psychology, and social work evolved when they defined the service they provide and began to thrive when members performed the service with competence (Feen-Calligan, 1996). Recently, AATA legislative consultant Matt Dunne reported that to develop income opportunities, the effectiveness of art therapy, which is to date largely unproven, must be established (Malchiodi, 2004).

**Values and Purpose of the Profession**

Defining what art therapists should know and can do is linked with what the profession values, what it believes about its purpose, and its intent to provide services to society (Ault, 1994; Gonzalez-Dolginko, 2000; Hodnett, 1973; Junge, Alvarez, Kellogg & Volker, 1993; Vick, 1996). Ault (1994), reflecting on the common vision shared by early pioneers, stated:

The first and foremost ingredient was our absolute belief in the value and importance of using art making and imagery in the treatment of patients. It was also understood one needed a foundation of psychology and clinical skills, but that art was central to the process. (p. 252)

Paralleling Ault’s statement, AATA’s mission and definition of the profession portray its values: Art therapy is a human service profession and art therapists are “dedicated to the belief that the creative process…is healing and life enhancing” (AATA, 2004, p. iv).

**External Influences on the Profession**

The opportunities to practice within existing healthcare structures also influence the formation of professional identity. Limited employment opportunities, salary levels that are lower than parallel disciplines, the “clinification” of art therapy positions, and the attitudes and behaviors of other professionals contribute to the image the profession has of itself (Allen, 1992; Johnson, 1994).

**Professional Identity Development**

The formal development of professional identity begins in graduate education. Levick (1995) recommends education that includes “training [and] core curriculum, role definition, basic knowledge, competency…relationship of self to other mental health educational teams, supervision and consultation, standards and research and a
code of ethics” (p. 291). Kramer (1994) advocates attention to one's own art. Bouchard (1998) recommends each art therapist pursue individual development in accordance with a sense of professional direction, which may include “personal therapy, spending time in the studio, building relationships of trust with other colleagues, reading, [and] reflecting on one's own praxis” (p. 159). Junge et al. (1993) believe art therapists must think of their education as a lifelong endeavor involving activism.

**Challenges to Developing Professional Identity**

In graduate education, “students find that their primary professional identity formation takes place through practical training” (McNiff, 1986, p. 135). Yet, practica or internships are often “weak in their integration and support of program goals” (Nichols & Owens, 1995, p. 44) and insufficient in providing opportunities to facilitate the construction of students’ professional identities (Furco, 1996; Nichols & Owens, 1995). Reisch and Jarman-Rohde (2000) describe an increasingly adversarial climate in social service placements: Human services are subordinated to the cost of the services, and clients are discharged not because they have been “cured” but rather because their insurance benefits are exhausted. It is difficult for new professionals who are still learning to perceive patterns in clinical situations to develop expertise and feel confident about their work when time and insurance regulations constrain so much of their experience in clinical situations (Daley, 1999). Other realities of practical training that interfere with the potential for success include students’ lack of motivation for placement, unresolved personal problems, and issues related to balancing the internship with work, family, and school (Switzer & King, 1999).

In terms of cross-training, my own university began offering a second master’s degree that combines art therapy courses from our AATA-approved program with courses from our graduate counseling program. This package was created in response to art therapists like Susan Eastman (mentioned above) who sought an additional credential that might be more marketable. The practicum hours were cross-listed and supervised by both Licensed Professional Counselors (LPCs) and ATRs to meet both counseling and art therapy standards. As art therapists know, ATR supervision can take place on or off site; however, counseling professional standards in our state require that an LPC be present at the practicum site. Many students who do not have an ATR on site have more day-to-day contact with an LPC, and a concentrated effort is required to strike a balance between the counseling and art therapy perspectives.

Ault (1977) asked, “Are you an artist or a therapist?” Are students who complete counseling and art therapy degrees counselors or art therapists, or some combination of both? Does this matter? Cashell and Miner (1983) concluded that lack of role clarity was an important contributing factor to the feelings of stress, burnout, and career dissatisfaction among creative arts therapists. How can these issues be addressed?

**Service-Learning and Practica**

Service-learning is a method by which students learn and develop through active participation in thoughtfully organized service experiences coordinated in collaboration with the school or university and community (Wade & Saxe, 1996). Service-learning has been described as a philosophy of human growth, social vision, a pedagogy, and a way of knowing (Jacoby, 1996). Although service-learning shares certain common attributes with practica and internships, its unique qualities have potential to significantly add to a student’s practicum experience (Table 1). Both practica and service-learning seek to enhance academic learning and provide relevant service to the community. Practica have a third objective, which is to foster professional socialization through gaining and practicing work skills. The third objective of service-learning is to prepare students for purposeful civic learning.

Seven categories of purposeful civic learning are identified by Howard (2001): academic, democratic citizenship, diversity, political, leadership, inter- and intrapersonal, and social responsibility learning. Two categories of purposeful civic learning were of particular interest in our study relative to how they might contribute positively to identity construction: inter- and intrapersonal learning pertaining to oneself and others and social responsibility learning regarding students’ personal and professional responsibility to others.

**Method**

**Participants and Procedure**

To explore the influence of practica and service-learning on professional identity, the experiences of students in a practicum class were studied over one semester. All 11 students in the class consented to be participants in this study, which followed the university’s regulations concerning human subjects. During the semester, the students were placed at individual practicum sites. In addition to their respective practicum placements, the students participated one afternoon a week, together as a class, in service-learning at an elementary school I’ll call “Macintosh.” (Any names used of students and children are also pseudonyms.) The graduate students also met weekly as a group for the practicum seminar.

According to the tenets of service-learning, the service rendered was negotiated between the service acquire (Macintosh) and the service providers (the art therapy class). As the initial phase of the project, the art therapy students listened to the problems identified by the teachers at Macintosh. Because critical problems in the school community had to do with vandalizing and bullying in the four student restrooms, these became the focus of the students’ service project.

Negotiating the service project included not only hearing about the problem from the teachers but also communicating to the teachers what we providers brought to the table to address the problems—our interests, strengths,
and skills. As art therapists, painting murals in the bathrooms seemed one appropriate intervention to repair the damage. First though, we needed to assess the reasons why students were bullying their peers and vandalizing the bathrooms and then to identity a realistic goal that could be accomplished by the end of the semester.

Service-learning believes in empowering service acquirers to mobilize their own resources to address their concerns and then to work together in this pursuit. We realized the problems would not be solved in one semester, but we sought to determine a good first step in addressing the problems and to facilitate continued work on the problems on the part of Macintosh by providing our observations and modeling our strategies for addressing the issues. Doing this required drawing from art therapists’ knowledge of human developmental and psychological theories as well as assessment and treatment methods (AATA, 2004).

Once a week, the art therapy class (students and instructor) met at Macintosh to take part in the service-learning project, which consisted of a total of 18 direct-service hours working with children during the course of the semester. Macintosh teachers initially nominated over 100 children to take part in the service-learning project. However, because our program would take place after school with a minimum of school staff on site, because the principal knew certain children she thought needed individual mentoring, and because there were only 11 university students, the original list of 100 children was reduced to 11. The 11 children were drawn from first through fifth grades and served as representatives of and liaisons to their classes. In the process of addressing the bullying and vandalizing problems, the 11 children’s individual issues became apparent and were addressed concurrently. During the 1st week, university students selected names of Macintosh students (drawn from a hat) with whom each would work one-to-one during the semester.

As mentioned, each university student worked concurrently at an agency off campus, completing on average of 130 direct-client contact hours at her practicum site independent of the Macintosh project. Students received on-site supervision and university supervision via site visits and seminar participation. Based on observations of university students and their discussions during seminars, readings and papers were assigned every week with topics designed to extend student learning at each weekly juncture. As an inspirational text, students read The Doctor Stories, by physician and poet William Carlos Williams (1984). Additional art therapy and other related readings were added in response to various issues throughout the semester.

The routine at Macintosh became one of transitioning from the school day, where each university student worked briefly with her Macintosh student. This was followed by a group warm-up activity and snack, then carrying out the afternoon’s task and lastly, summarizing the afternoon’s accomplishments before the children went home. The high point of the semester began when children wrote their ideas about good bathroom rules and set out to represent these rules pictorially in the form of bathroom wall murals. The bathroom issues identified by the children were publicly discussed in the school newsletter and in assemblies, so the whole school could be involved in the service project. At the conclusion of the semester, murals were designed and executed by the children on four restroom walls (Figures 1-4).

The weekly sessions were not easy. Emotional issues and learning problems among the children became increasingly evident and these affected their participation. Consistent with traditional art therapy, our class needed to evaluate each weekly session to consider the issues of the individual children and those of the group, as well as those of the school community. A continuous cycle of assessment, goal setting, carrying out art activities, and evaluation was...
set in motion. In contrast to traditional art therapy, the graduate students problem-solved together and reaped the benefits or suffered the consequences of the interpretations made and actions taken.

Our community of learners grew during the semester in ways that might not happen in a traditional practicum. Art therapy students began leaving notes with the teachers of their children regarding behavior observed and questions they had. Teachers communicated back via e-mail and began stopping by to see the progress. Because we were getting a lot of attention school-wide, we thought it would be considerate to invite the art teacher to join us. She did, and she was able to provide insight concerning the children’s situations. Several parents began to drop in to participate, as well as other school staff ranging from after-school daycare staff to janitorial staff. A community of caring individuals (Wade & Saxe, 1996) began to develop. As Rhoads (1997) explained, a sense of connection established through service-learning contributes to reducing alienation, fostering understanding of human differences, and fulfilling real needs in society. Students who feel connected to their social world and those with whom they interact on a service basis develop an “ethic of care” as they struggle to solve important problems through action and reflection.

After children were dismissed each week, the graduate students met for a seminar during which we reviewed issues from the week including not only Macintosh issues but also practicum issues. Students’ experiences in both venues seemed to complement each other. That is, various problems faced at the service-learning site were answered by some of the students’ experiences at their individual practicum sites. The reverse was also true. Students with problems at practicum sites often discovered solutions in their service-learning experience.

Also interesting was what students learned from their Macintosh children. Graduate students and Macintosh students were randomly assigned at the beginning of the semester, yet the children often reflected back the students’ own issues. Each art therapy student seemed to gain personal insight and growth from her relationship with her individual child. For example, Linda, a graduate student who struggled with feeling she did not belong, drew Diana’s name. Diana had no friends. Lynn, who felt “useless” at her practicum site, drew Nakeesha, one of the children with the greatest needs. The only two individuals with learning disabilities (one from the university, one from Macintosh) were paired together. One of the most articulate and creative graduate students, Joan, was paired with...
the most talkative student, Becca, who prided herself on her creativity. Maxine, whose grown son had struggled with attention deficit disorder (ADD) in childhood, worked with a boy with ADD. Cathy, whose father was critically ill and who had complained about being burdened by his care, was paired with a child whose father had died 3 months earlier. Mala, having written that her adult practicum clients were “sucking her energy,” really understood the meaning of “energy drain” in working with the only kindergarten student.

Rhoads (1997) explained how service-learning facilitates construction of meaning and personal development by referring to the feminist notion of the particular other and relational views of development (Gilligan, 1982). Interactions between self and other establish to a large degree how the self is formed. To care about another human being, one must have a relationship with that human being (Belenky, Clinchey, Goldberger & Tarule, 1996; Noddings, 1984). When a baby cries, the mother knows something is wrong and “feels with” the infant. A sense of “connected knowing” is achieved through empathy or sincere attempts to understand another person’s ideas through sharing the experience (Belenky et al., p. 112).

Data Collection and Analysis

A three-phase method of assessment was developed to determine how practica and service-learning contributed to professional identity (Table 2). First, a baseline was established for each university student by reading her autobiographical essay written for admission to the art therapy program in which she stated why she wanted to pursue art therapy as a career. Each student was also interviewed and asked to assess her professional identity at that point in her career. Second, process data were collected throughout the semester. These data consisted of the instructor’s observations at Macintosh, students’ seminar participation, observations from practicum sites, and the weekly reflective papers. The final phase of assessment was conducted at the end of the semester when students were interviewed once again. They completed a second self-assessment and made portraits of themselves as art therapists. The practicum site supervisors as well as the Macintosh constituents completed evaluations of their practicum experience.

The data were analyzed using phenomenological methods (Moustakas, 1994) that involved examining data from each source and searching for the key elements or phenomena that stood out in the data. In this process, key elements were highlighted whereas extraneous elements (irrelevant or repetitive information) were set aside. The elements that were highlighted were then arranged or grouped by common themes, which contributed to building the findings of the study.

Both individual and composite analyses were completed. An individual analysis was completed for each of the art therapy students, tracing for each the development of professional identity over the course of the term. The analyses of the 11 students showed influences from both service-learning and practicum experiences that were unique to each individual. It also showed some similarities among the students’ experiences. These similarities were useful in assessing whether service-learning made a difference to the class as a whole, and they were examined more carefully to form a composite analysis of the entire class.

In phenomenology, there are two different composite or group analyses—a textural analysis and a structural analysis. The textural analysis describes what happened. The structural analysis looks at the structures underlying what happened or how, and perhaps why, things occurred. In the textural analysis, all the data were organized—not by individual student but by week—to determine whether certain events during the semester had an influence on the group of students (see Table 3 for an abbreviated version). For the structural analysis, the important elements that arose in the data were grouped according to whether they seemed to be derived from the practicum, from the seminar, or from service-learning. This determination was based largely on student identification of learning derived from one or the other venue. Although impossible to completely extricate the contributions of service-learning and practicum, the salient features of each that contributed to professional-identity construction are highlighted below.

Key Findings

Practicum

The practicum had distinct features; there were multiple sites, each with its own site supervisor and conditions in which to work. The practicum was found to contribute to professional identity, especially in the area of expertise because of the particular clinical population each site specialized in treating and the knowledge the students (the

<table>
<thead>
<tr>
<th>Table 2 Summary of Data Collection</th>
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<tr>
<td><strong>Three-Phase Assessment of Professional-Identity Construction</strong></td>
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<tr>
<td><strong>Baseline</strong></td>
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<tr>
<td>• Written autobiography</td>
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<td>• Preliminary interview</td>
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<td>• Self-assessment of professional identity</td>
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<td>• Weekly written assignments</td>
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coresearchers) could achieve through learning about that population. Due to the fact that the experiences at the practicum sites varied in quality in terms of work conditions and supervision, the resulting range of learning achieved among the students was inconsistent. One example concerned a site where an art therapy student was having difficulty with adolescents who “didn’t want to do no art therapy.” The art therapists were working in the evening when the full-time program staff had gone home. When this was brought to the attention of the program manager

<table>
<thead>
<tr>
<th>Week</th>
<th>Practicum/Service-Learning Activities</th>
<th>Themes Expressed in Seminar</th>
<th>Assigned Paper Topics</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Met on campus. Made arrangements for site visits.</td>
<td>Reviewed practicum placements.</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Individual interviews.</td>
<td>No seminar.</td>
<td>What is professional identity? Assess/describe your professional identity.</td>
</tr>
<tr>
<td>3</td>
<td>Met on campus and at service site.</td>
<td>Continued to plan for service-learning and practicum.</td>
<td>Summarize practicum activities or work with a client.</td>
</tr>
<tr>
<td>4</td>
<td>Met at Macintosh with principal.</td>
<td>Students shared problems from practicum. Planning service-learning.</td>
<td>Read Doctor Stories. What is necessary to do art therapy?</td>
</tr>
<tr>
<td>5</td>
<td>First time with children at Macintosh.</td>
<td>Individual challenges through 1:1 assignments at Macintosh and at practicum.</td>
<td>Summary of practicum experiences/critical incidents.</td>
</tr>
<tr>
<td>6</td>
<td>Macintosh winter break. Practicum placements continue.</td>
<td>Understanding service-learning. Practicum challenges: clients, interpersonal relationships with staff, art supplies. Discouragement and fatigue.</td>
<td>Read Gift From the Sea. How will you take care of yourself as an art therapist?</td>
</tr>
<tr>
<td>7</td>
<td>Continue mural work. Various children acted out.</td>
<td>Art therapy professional issues in mural-making. How to address behavioral problems of Macintosh children.</td>
<td>Elaborate on a topic from seminar: Inspiration from clients, working with others, importance of art supplies, self-care.</td>
</tr>
<tr>
<td>9</td>
<td>Work on the walls.</td>
<td>Painting progress. Crisis with Nakeesha.</td>
<td>Do something to take care of yourself.</td>
</tr>
<tr>
<td>10</td>
<td>University winter recess.</td>
<td>University winter recess (Lynn worked individually with Nakeesha.)</td>
<td>No paper due</td>
</tr>
<tr>
<td>12</td>
<td>Continued painting.</td>
<td>Deepening relationships with clients and service recipients and with one another.</td>
<td>Someone who enhanced your identity. Also describe art therapy from the voice of a client.</td>
</tr>
<tr>
<td>13</td>
<td>Addressing new vandalizing incident. Last day to paint.</td>
<td>Summarizing progress of children; making their “certificates.”</td>
<td>Practicum and Macintosh comparisons.</td>
</tr>
<tr>
<td>14</td>
<td>The unveiling.</td>
<td>What was achieved at Macintosh.</td>
<td>No paper due.</td>
</tr>
<tr>
<td>15</td>
<td>Final interviews.</td>
<td>No seminar.</td>
<td>No paper due.</td>
</tr>
<tr>
<td>16</td>
<td>Practicum placements completed.</td>
<td>Summary of practicum and Macintosh.</td>
<td>No paper due.</td>
</tr>
</tbody>
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and additional milieu support requested, the unfortunate response was to discontinue art therapy for anyone who resisted participation. In another example, a student was doing a practicum in a high school where there were not enough tables and chairs for her clients. She asked the principal for more furniture. His response was, “They can work on the floor can’t they?” The student wrote:

I was very frustrated with that response as I felt that it was disrespectful towards me and my students…. If I ask a student to draw on the floor I feel as if that is just about saying to him or her that they are unimportant and further that I do not care how they feel. I think care of the materials, and in this instance, the space issues are metaphors for self-care and care of others and I think that those of us in the field of art therapy appreciate and understand this a lot more than the general public.

The predicted outcome resulting from such conditions, as articulated by Johnson (1994), is a shamed and humiliated art therapy professional. From the perspective of symbolic interaction (Mead, 1934), self-perception develops through the set of attitudes of others that the individual assumes. Thus, an environment that does not seem to value art therapy may become internalized, negatively affecting an art therapist’s professional identity.

Service-Learning

Service-learning contributed to expertise (for some students better than the practicum did) as we deconstructed what was important in art therapy and figured out how to practice our profession. For example, the students assessed the needs of the community as well as those of the individual children and designed an art therapy program to respond to those needs. An art therapy program was implemented and continually evaluated and modified as needed. Listening to the needs of the service recipients and evaluating our resources to meet their needs fostered thoughtful consideration about possibilities. This subtle distinction in thinking, “what can be done” versus “what is expected of me” in the practicum, led to reflection about the values and purpose of the art therapy profession. By working together through problems, all of us experienced the satisfaction and excitement of seeing the murals come to fruition as a reflection of the progress made individually and as a community.

As Elliott (1972) suggested, the growth of a profession is contingent upon its acceptance by a society that perceives the service is necessary and valuable. As a class, we learned firsthand about the value of art therapy within that school community and demonstrated this value to the teachers, parents, and Macintosh students. We also experienced a sense of being valued because of our contributions to the school.

The particular way in which this service-learning project was structured was a vehicle for helping students develop expertise in interpersonal and intrapersonal skills. Working together as a class at the elementary school and meeting together in a seminar were overwhelmingly mentioned by students as contributing to their professional identity. Students needed to collaborate and cooperate with one another. There were times when students did not agree. However, modeling, observing, leading, and following one another through different aspects of art therapy, and reflecting upon what they learned from each other through the seminar and writing assignments contributed to inter- and intrapersonal awareness. For example, Mala noted how, during our first introduction to the children, each person spontaneously utilized familiar skills:

It was obvious there was [sic.] all kinds of chaos going on and kids running around, but it was really interesting to see how everyone responds in a different way. I felt like we really supported each other in our own way of responding...and it makes me feel like the way I respond is okay because I know I'll be supported and I'll support someone who needs to be supported.

Jane agreed:

Just watching others’ approaches, you tend to learn to be more assertive or try to get to the kids with a different approach, like when I saw someone else not handling a child, I kind of step up and say, “Try this,” or I tried to talk to them in a different way…it was confirming to me…. You see other people and see how they work, and you learn from them too. Joan is very creative, and she would be teaching them how to hold a brush and I learned from her. We worked well together.

In contrast to the practicum site where difficult children were discharged from art therapy, similar situations in service-learning were handled differently; there was more of a sense of commitment and responsibility to others. As we worked on our community service project, certain children expressed serious needs and were very challenging for us. The entire class was exhausted from attempts to engage Nakeesha, for example, who rebuffed all approaches. One evening as Nakeesha was leaving, her mother (after reading a note from her teacher about the child’s behavior that day) began beating Nakeesha with a belt. This horrible and shocking incident, however, became pivotal for the well-being of Nakeesha and her mother, as well as for the class’s awareness of the importance of community in addressing problems and making progress. We informed the principal who met with the mother and arranged for outside therapy for Nakeesha. The mother disclosed that the family was going through a divorce, yet she managed to attend a school-wide parenting retreat that had been scheduled around that time. Nakeesha’s teacher began a “circle of friends” for her. This meant that in a class meeting, the teacher discussed the fact that Nakeesha was having some serious problems and that she (the teacher) alone couldn’t help her. She asked for volunteers to help Nakeesha when anyone noticed she was having a hard time. Eleven students raised their hands to be in Nakeesha’s circle.

Discussion

Service-learning is not intended to be portrayed as the only way to cultivate professional identity. Nor is it the
only remedy to problems that exist in practica and the clinical world after graduation. Rather, this article presents service-learning as one possible pedagogical approach for nurturing professional identity, and as a method that warrants further study.

This study explored the experiences of one class of 11 graduate art therapy students over one semester. Among the limitations of the study was the difficulty in definitively assessing the discrete effects of the service-learning and practicum experiences. The interaction of the influences of the students’ past and present life experiences and other variables made the effects of service-learning difficult to fully discern and evaluate.

Despite the limitations and effort required, a number of positive outcomes were discerned, and service-learning was found to nurture the aspects of professional identity described in the literature. Service-learning contributed to students’ learning art therapy approaches and techniques that one might assume to be traditionally within the realm of learning achieved in the practicum.

The service-learning project allowed students to experience art therapy in an environment in which it was valued, reflecting the value and worth of the profession. Understanding the value and worth of art therapy should help art therapists in settings where staff are unfamiliar with or unreceptive to art therapy or where patients’ brief lengths of stay preclude many meaningful art therapy sessions. Art therapists who are clear about who they are and what they do should develop a sense of strength as well as the ability to keep their visions and ideals at the forefront of their work.

The integration of service-learning added depth to the reflection and discussion in the seminars. Having a shared field experience to discuss together was of immeasurable value. In contrast to other seminars involving a round-robin discussion on what happened in someone’s practicum site, in this seminar discussions included such topics as the value of art therapy, the relationship between caring for self and commitment to others, and the importance of thinking of the profession as a calling or vocation. Because of the strong emphasis on reflection in service-learning philosophy, important insights were made that contributed to professional identity. It is of particular importance to note that service-learning was only effective to the extent that the instructor guided the discussion of students’ experiences. It was not enough to find the service-learning site. A lot of work went into teasing out the significance of what was happening to the students, constantly monitoring their experiences and finding commonalities to help them wrestle with identity issues that were evident in their writing and seminar discussions.

This experience inspired Macintosh to invite our class back the next year, and our department added service-learning assignments to a number of our classes. However, understanding the benefits of service-learning in art therapy education deserves additional consideration through further research. Service-learning seemed to add to the professional preparation of art therapists by providing a supportive culture in which to gain expertise, examine values, and develop personal awareness. Who am I and what calls me to art therapy? What is my responsibility to myself and others? What are art therapists’ unique skills and how can art therapists effect change in our communities? These questions and their answers, brought to the foreground through service-learning, should be among the foundations of art therapy and of art therapy education.

References


