Abstract

Based on the American Art Therapy Association Research Committee's interest and support for learning how research is taught, a quantitative and qualitative survey of master's-level programs was conducted. Twenty-four of the 44 surveyed programs responded. Twenty-three (95.8%) of the respondents required a course of at least three credits, usually taught by doctoral-level faculty. Most programs indicated they taught several research methods, covered numerous course goals, and introduced multiple topics. Over half the programs indicated their goals were reviewing published research and formulating research questions; the integration of research and practice was selected the least. Qualitative research approaches (87.5%) were the primary orientation of most programs with quantitative approaches a close second (75%). Survey results revealed most educators perceived that students feared learning about research. Respondents commented that research training enhanced development of students as reflective practitioners, increased their marketable professional skills, and contributed to the development of new knowledge.

Introduction

An increasing number of research articles, opinion papers, books, panel discussions, conference papers, and informal discussions on various topics related to art therapy research appeared in the last decade. To further examine the issues that have been raised in the field, the American Art Therapy Association (AATA) Research Committee met in November 2000 and decided to investigate current practices in teaching research that might be useful to art therapy educators as they define, design, and teach the research component of their programs. In this study, we compare our results to those found by Linesch (1992), who surveyed art therapy educators' approaches to teaching research about a decade ago.

Art therapy educators may define and design their programs' research component based on their institutions' research requirements, the philosophical and theoretical orientation of their programs, and the 1999 AATA education standards that went into effect July 1, 2002. These standards are broad and open to interpretation. The standards simply list research as a “required content area.” “These content areas may be taught by faculty from related fields and/or faculty members who hold an ATR” (p. 6). In addition, a “thesis or equivalent” is required, taught by “faculty members who hold the ATR” (p. 5).

Literature Review

Linesch (1992) conducted her survey of 32 art therapy programs with a return rate of 25 (78%). Despite the fact that research was not required in AATA-approved programs at that time, she found that 76% of responding programs included research. She speculated this might be based on an institutional requirement for master's-level programs or a general faculty commitment to research. Those that offered a research component stated their major goals were to support the acquisition of clinical skills; that is, “gain mastery in areas of concentration; synthesize studies and clinical experience” (p. 130). Acquiring “scientifically sound research skills” was cited more often as a goal by “those programs attached to medical or research institutions” (p. 130). The research component was offered as a free-standing course (76%) or embedded in one or more courses (24%).

In terms of research approaches favored by Linesch's respondents, 49% chose quantitative approaches while 43% selected qualitative approaches. In addition, 8.2% of programs chose action research. Eighty-four percent selected case study or field research; descriptive research was designated by 76%, as was quasi-experimental. Fewer, only 32% each, used naturalistic-ethnographic or phenomenological-hermeneutic approaches. These diverse approaches were also reflected in that either art therapists or those in a related field taught research. Instructors at both the mas-
ter's and doctoral levels had training in quantitative, qualitative, or mixed methodologies, but the extent and depth of training were not specified.

Linesch (1992) examined the curriculum descriptions that address the program's research component and found that both case study and empirical-quantitative research were mentioned with equal frequency (72%). Linesch observed a trend to pursue what she characterized as "non-research" projects under the guise of research, that is, "clinical program development, audio-visual projects, extra clinical experience, spiritual and personal development and grant writing" (1992, p. 133).

Although Linesch (1992) found what appeared to be a growing commitment to teaching research, she noted a lack of relationship between learning traditional research methods and the choice of methods used in the research projects, in which clinical case studies were used with the greatest frequency. She speculated that a "lack of specific methodologies for art therapy research" might be a causal factor, and she cited "diversity of opinion regarding the goals, values and methodologies of master's-level art therapy research" and the "complexity of the issues" as variables as well (p. 134).

In other venues, primarily journal articles, some art therapists expressed the view that the absence of teaching a comprehensive research approach with applications to clinical practice is an impediment to establishing art therapy as a legitimate profession and a deterrent to establishment of a professional identity as effective practitioners (Anderson, 1983; Feen-Calligan, 1996; Hodnett, 1973). Over 3 decades ago, Hodnett (1973) argued that in order for art therapy to be considered a profession, the field required "a base in a substantial body of knowledge" (p. 108) that defines the profession. In a comparative study of three related fields, Feen-Calligan (1996) noted that each professional field had to "establish itself as a legitimate one" (p. 171). Applying this to art therapy, she stated, "Art therapists must be able to define the service they provide and to perform the service with competence. That is why research demonstrating the effectiveness of art therapy is so important" (p. 171). Other art therapists argued that research was critical to the advancement of the field (Gerstenberger, 1993; Hagoed, 2003; Julliard, 1998; Rosal, 1989; Tibbetts, 1995). Linking research to clinical practice was identified as critical to the advancement of the field as a profession (e.g., Anderson, 2001).

Our interpretation of AATA membership surveys (Elkins & Stovall, 2000; Gordon & Manning, 1991; La Brie & Rosa, 1994; Pearson, Walker, Martinet-Smith, Knapp, & Weaver, 1996; Rauch & Elkins, 1998) indicates a lack of emphasis given to research in that the predominantly master's-trained practitioners ranked research at the bottom of their job responsibilities. It is unclear whether this can be seen as a lack of desire or a lack of opportunity. These findings from a decade of membership surveys reflect those reported by Knapp, Knapp, and Phillips (1994) in a study of 2,500 art therapists. In their survey, a rank ordering of responsibilities did not even give research as an option. Under areas of major knowledge, research ranked eighth—at the bottom of the list—suggesting that knowledge about research and applying that knowledge were low priorities among clinical practitioners. Even graduate art therapy program directors and faculty of AATA-approved programs ranked research as a low job priority. Lusebrink (1993) found that few art therapy program directors and faculty listed research among their responsibilities.

Nonetheless, in the face of this seeming lack of emphasis placed on research training, the 1999 AATA education standards specified that either an art therapist or an instructor from a related field must teach a research component to fulfill the new educational standards. Although a master's degree was considered a sufficient level of training for this responsibility, doctoral-level education has been the traditional standard for teaching research in most fields. AATA membership surveys from 1990 to 1999, however, indicated no discernible increase in members who earned doctorates during that period (mean = 5.8%), suggesting a possible problem of supply and demand for faculty whose qualifications indicated proficiency in research. Most members reported the master's degree as their highest level of training (83.5% in 1998-1999). If only a few art therapists trained at the doctoral level are available to teach research and if training in research is seen as essential to the profession, then training must be offered at the master's degree level.

In addition to the requisite training for instructors, the question arises as to what methodologies should be taught in a research course. In the mid 1990s, Junge and Linesch (1993) and Rosal, Linesch, and Hite (1995) engaged in a debate comparing the merits of quantitative versus qualitative research approaches. Questioning appropriate methodologies for art therapy research evolved over time into an appreciation for a range of methodological approaches (Anderson, 2001; Carolan, 2001; Julliard, 1998; Kapitan, 1998; Rosal, 1998). Some art therapists suggested increasing the variation or range of research approaches and including other models such as art-based research and action research, using both qualitative and quantitative approaches (Anderson, 2001; Kaplan, 2001). These authors promoted a move toward mutual acceptance and integrative models. For example, an art-based approach included methodologies that could be either quantitative, qualitative, or a mixed design (e.g., Julliard et al., 2000; McNiff, 1998b). Rosal (1998) reminded us that both qualitative and quantitative approaches are important, but we must "choose the correct methodology for the research question" (p. 48).

Available teaching materials might influence what methodologies are taught in a research course. Although support for teaching research was reflected in a recent increase in books and research articles, only a few art therapy research texts have been published. The first was an AATA-produced publication (Wadeson, 1992), followed by several books (Ansdell & Pavlicevic, 2001; Feder & Feder, 1998; Kaplan, 2000; McNiff, 1998a). Several issues of this journal focused on research methodologies and goals for teaching art therapy research. Because a comprehensive text on art therapy research does not yet exist, art therapy journal articles and assessment tools must be used
to supplement generic texts from education, psychology, or other related fields.

Teaching art therapy research requires programs to determine the goals of research courses and to hire faculty who are qualified to teach research and who can select research designs, methods, and materials in accord with the program’s overall philosophy. Programs must meet institutional requirements, AATA education standards and, often, state licensure standards, as well as incorporate linkages between research methodologies and clinical practice. Solutions to these integrative challenges must come from the instructors of research courses and program directors themselves. The 1999 education standards are still relatively new (having taken effect only as of July 2002) and currently do not provide a standard set of approved or commonly endorsed conceptual frameworks for teaching research.

A survey of art therapy educators’ experiences and practices with the implementation of the research component within their respective programs was undertaken to provide a picture of our current practices. The purpose of this survey was to determine who teaches the research component to art therapy students, the content of the research component, the teaching methods and materials used, and the experiences and advice that art therapy educators have for integrating research into art therapy programs.

Method

The authors, members of the AATA Research Committee, designed a four-part “Teaching Research: A Survey of Art Therapy Educators” that consisted of 18 questions: 12 were forced-choice and 3 were open-ended to allow for more in-depth and individualized responses (see Appendix A). In two additional questions, we asked whether respondents would share their syllabi and queried whether they were interested in participating in a follow-up phone survey. Phone survey questions were designed after surveys were received and reviewed; the purpose of the phone survey was to provide clarification and depth to the written survey responses. Those results are not reported here.

Participants

Program directors of the 44 master’s-level art therapy programs listed in the AATA “Art Therapy Educational Program List 2001–2002” (2000) were surveyed. Twenty-four (54.4%) returned completed or partially completed surveys.

Procedure

At the end of August 2001, the first author sent a cover letter, the survey, and a self-addressed, stamped envelope to all participants. The due date for return of the survey was September 17, 2001. At the end of September 2001, all AATA-approved programs listing an email address received an email follow-up request for response to the surveys.

Data Analysis

Data analysis for the forced-choice questions in Parts I–III was quantitative and relied on frequency counts converted to percentages. We posed three broad questions: Who teaches research to art therapy students? What is the content of the course(s)? and What teaching methods are used? A qualitative analysis was used for responses to Part IV. Three open-ended questions focused on educators’ experiences with teaching research, asked about benefits and challenges of integrating a research component into the art therapy program, and invited recommendations.

Analysis of the qualitative section followed recommendations outlined by Bogdan and Biklen (1992), Coffey and Atkinson (1996), Ely (1991), and Ely, Vinz, Anzul, and Downing (1997). Comparing and contrasting responses were used to develop categories, and themes were formulated for each category. To weigh the responses and indicate major trends in the data, the number of responses was also included for each category.

Results

Of the 24 surveys returned, 15 (65%) were from AATA-approved programs, eight (34%) were from programs not on the approved listing, and one respondent (4%) did not specify affiliation. A comparison of responses from each group revealed no apparent differences in responses to questions; therefore, all responses were combined for this report.

Part I: Programs Teaching Research

In Question 1 we asked, “Is a research course part of your art therapy program?” In line with the AATA education standards effective July 1, 2002, all respondents stated that they include a research course in their programs.

Question 2 asked how long research courses had been offered (Table 1). Twenty-two programs (two did not give responses in years) reported offering research courses for a range of 1-30 years. The largest group (6) had offered it for 2 to 3 years. If grouped by 10-year intervals, just over half (13) of the programs had offered research for only the past decade. In the following question, we asked if the research course was required or elective. All but 1 of the 24 programs (96%) had implemented research training as a required course.

Table 2 shows considerable differences in the number of credits earned in the research courses for the 23 programs that responded correctly to Question 4. Seven programs (the mode) taught research as a 3-credit course (the mode). However, 17 programs (77%) offered research for more than three credits and may have interpreted this question broadly. Two programs offered research throughout the program. Therefore, research is apparently offered in several formats: as a free-standing course, in two or more courses, or included in the thesis or equivalent requirement. The responses to this question indicate variations in the respondents’ interpretation of what courses constitute research instruction.
When responding to Question 5 concerning location of the research course, four programs selected more than one choice. Responses shown in Table 3 indicate that just over half the programs (58%) offered a research course within the art therapy department. Of these, four (17%) offered the course jointly with another department such as psychology, art education, or “interdisciplinary.”

Data shown in Table 4 indicate that most of the faculty who taught research held a doctoral degree. Of this group, one third of the doctorates were art therapists. This question requested respondents to make choices within several sub-groupings. However, more than half of the respondents (58%) selected from only one subgroup. For example, results suggested only three research instructors were Registered Art Therapists (ATR). This, however, is not consistent with the number of research courses taught within art therapy programs (58%).

**Part II: Course Content**

The results for Question 7 are given in Tables 5a and 5b. When asked about the primary orientation of their research courses, many respondents checked several of the choices given. There were many different combinations (Table 5b) selected with six programs choosing all five orientations (one added that primarily qualitative methods were taught) and four selecting both quantitative and qualitative research methods. Art-based alone was selected only by one program, and action research was selected only in combination with other orientations by eight programs.
Table 6 shows responses to Question 8 in which respondents were asked to rank order the top five of eight choices for their research course goals. There were diverse approaches to this question. Therefore, Table 6 gives frequency counts based on all responses rather than rank ordering. Of the programs that prioritized, five designated “integrating research and art therapy practice” as their first priority, and five designated “understanding and reviewing published research.” In addition, four selected “learning about research methods,” three selected “formulating research questions,” and one wrote in “encouraging professional development” as first priority. The most frequently selected choices, overall, were “understanding and reviewing published research,” and “formulating research questions.”

Major topics covered in the research course (given in Table 7) show that most programs selected qualitative research. More than 75% selected six other topics: developing research questions, literature search, designing research projects, writing proposals, quantitative research, and ethical considerations. Nearly two thirds of the programs teach art-based methods and require students to write reviews and critiques of research literature. More than half teach statistics. Just over half teach action-based methods, and half indicated they require implementing research projects.

Part III: Teaching Methods

As shown in Table 8, readings from journals and textbooks, lecture, student work, and discussion were the primary teaching methods, while 10 programs indicated they required research projects. Four educators wrote in responses related to using art: “art experientials,” “using art to decrease writer’s block and inform the research through visual means,” “art work to help visualize issues,” and “art-making for deeper understanding of concepts and information.” Three other write-ins were “peer review,” “written literature review,” and “very significant amount of individual meetings between faculty and students—mentorship is critical.”
In Question 11, we asked participants to write their responses to “What textbooks do you use?” The most frequently selected texts were *Art-Based Research* (McNiff, 1998) (33%) and *A Guide to Conducting Art Therapy Research* (Wadeson, 1992) (25%). The 24 respondents identified 25 texts. A list of texts and of frequency counts is given in Appendix B.

In Table 9, results are based on the 21 programs that checked items regarding other required readings. Most respondents used research articles from journals in art therapy and related fields. Again, five educators selected the AATA research guide, probably in part because it was listed as a possible choice for this question. Three programs (14%) used only art therapy journal readings. Two programs (9.5%), in which the course was taught in another department, only used readings from outside the field of art therapy, suggesting a generic course might have been required by the program, department, or institution.

**Part IV: Experiences**

The third part of our survey was based on responses from 19 (79%) educators. Five respondents chose not to answer these questions; therefore, generalizing of results from this section is more limited. Three open-ended questions focused on educators’ experiences with teaching research and addressed benefits and challenges of integrating research component into the art therapy program. Respondents were also invited to give recommendations. Responses varied substantially with regard to their length and depth, suggesting a wide range of experiences.

In Question 14, we asked, “Based on your experiences, what recommendations would you give for integrating research into the art therapy curriculum?” Responses to this question fell into three categories: (1) integrating research with the art therapy curriculum (n = 12), (2) selecting topics for a research course (n = 4), and (3) teaching strategies (n = 4). Eight respondents suggested integrating research into all aspects of the art therapy curriculum and including research readings in all courses: “Research should be a way of thinking for students and programs.” One said, “Demystify research and approach it as an ongoing process.” Four respondents focused on various ways of developing faculty resources to enhance integration. For example, one said:

> I would recommend a beginning course that can be taught by the art therapy faculty and a faculty who has experience with teaching research. That way the art therapy faculty can help mold the course towards the art therapy students’ needs.

Another recommended conducting “a research course workshop for other art therapy faculty and on-site art therapy supervisors.”

Four educators gave recommendations for teaching strategies that involved “balancing[ing] solid research methodology and understanding with the creative, explorative aspects of research.” Two respondents in this group explicitly advocated for incorporating artmaking into the process of research preparation. Not all programs required students to conduct research; however, three educators addressed ways to facilitate student research: “Conduct research in conjunction with practicum in order to make it practical and efficient,” “Encourage collaborative research,” and “Introduce students to real people who do interesting research.”

When making recommendations on selecting topics, four educators spoke about offering students a wide range of research methods including quantitative and qualitative approaches. Two themes emerged from all responses to this question: (a) View teaching and learning about research as a way of thinking and as an ongoing process that involves the whole program and faculty, and (b) present a wide range of research methods to students and balance solid research methodology with creative approaches to teaching that may include artmaking.

In Question 15, we asked, “What are some of the benefits of having art therapy research in your program?” Educators’ responses were categorized as benefits to students (n = 28) and benefits to the profession (n = 7). The most common responses related to benefits to students were: contributing to training students as reflective practitioners (n = 9); integrating academic, experiential, and clin-
ical learning (n=5); and developing other student competencies (n=14). One educator wrote, “I can’t imagine a program without research. It is invaluable in training a fully reflective clinician and sharpens students’ thinking about the relationship between training and practice.” In the words of another educator, “Research teaches systematic methods of investigation that parallel therapy.” Respondents also spoke about integrating cognitive and creative levels of competency as well as integrating academic and clinical material. Thus, responses in these two subcategories emphasized the link between research and practice, viewing practice as the basis for research and research as a way to critically examine and evaluate practice.

Fourteen educators identified other student competencies enhanced by integrating research in the program. These included preparing students for thesis writing, developing an area of specialization and expertise, providing a transition to professional life, developing a professional language, and successful competition with other fields.

Benefits for the development of the profession resulting from the research course were cited in seven responses. Research was viewed as a way to increase students’ professional participation. These educators stated that, as a result of the research course, art therapy students could understand the need for research, become more engaged in research, and contribute to the existing body of knowledge. For example, “Art therapy research is sorely needed in our field; plant seeds early in training so that a growing number of art therapists will not only embrace research, but conduct it.” The following themes synthesize the benefits: (a) Learning about research is invaluable to students’ development as reflective practitioners when faculty view research as critical examination and evaluation of practice, and (b) learning about research increases art therapy students’ competencies and participation in the development of the profession.

In Question 16 we asked, “What are some of the challenges of having art therapy research in your program?” Responses were broadly categorized as challenges for students and challenges for faculty. Challenges for students were cited in 16 responses that included faculty perception of students’ fear, resistance, and poor preparation for research. Some respondents explored potential sources of what they referred to as students’ resistance. While four educators identified a lack of specific skills (difficulty writing and learning statistics), five other educators tied resistance to specific characteristics of “the typical art therapy student.” For example, one said: “Art therapy students are not naturally research-oriented. It is a different style of learning and processing information. Making the shift from a visual learning style to a research learning style is a real challenge for some.”

Whereas the research course was experienced as a challenge for students, it also appeared to pose challenges to instructors according to 13 educators. Four respondents indicated a sense of pressure involved in teaching research, particularly when students were required to conduct research within specific time constraints. Another set of challenges was seen as arising from restrictions in some teaching institutions that negatively impacted the research course—such as lack of funding and resources and difficulties finding appropriate faculty to create an art-therapy-specific research course. Two themes emerged from the responses: (a) Educators attributed what they perceived as students’ resistance and difficulties to a lack of preparation and skills, as well as to unique characteristics of art therapy students; and (b) constraints of time, demands on faculty, and university regulations added to the challenges that art therapy educators faced in teaching the research course.

Discussion

When interpreting and discussing the results, it is important to understand the limitations of this survey. Several factors in the design of the survey emerge as affecting responses. First is the problem of definition. This problem of definition of research takes at least two forms: (a) wording of questions, and (b) multiple definitions of research methodologies. Questions were worded to elicit a response based on a single research course. Respondents replied to these questions based either on the research course offered in their program or (unexpectedly) based on a series or sequence of courses that cover research topics. Examples of these courses are thesis, assessment, and tests and measurements. This indicates that there are varied forms of interpretation of what is adequate or desirable in terms of research instruction in art therapy and raises the question of what constitutes a research course. It also became clear that respondents define research methodologies differently, possibly depending upon how they were trained. For example, some textbooks identify narrative case studies as a research method and others do not. Texts differ somewhat in definitions of qualitative and quantitative methods as well as the emphasis given to each. In our survey, we did not ask where and how our participants were trained in research, but we noticed that nearly every program used a different generic research textbook.

The second problem involved the lengthiness of the survey—a few surveys were only partially completed. Third, respondents did not always follow directions given for each question; some did not answer all parts of each question. Also, only 19 (79%) respondents completed Part IV of the survey, further limiting the ability to generalize results from that section. Finally, because the survey was mailed at the end of August and early September 2001, just prior to the events of September 11, the response rate may be have been reduced. A response rate of 54.5% limits the ability to generalize results to all 44 programs. Despite these limitations, data generated valuable information for those challenged with teaching research in our field.

Part I Findings

All responding programs offer research; six of these initiated a course during the previous 3 years, suggesting addition of the course to comply with AATA education standards or state licensure regulations. Just over half the programs implemented a course within the past 10 years,
which might indicate a response to the attention given to research in the literature and to the increasing availability of art therapy research studies over this period.

Linesch (1992) found that a free-standing research course was offered in 76% of the programs she surveyed. Our survey indicates that research is offered as a free-standing course (or courses) in all programs. Seven programs (30%) offer it for three credits. However, nine programs (39%) exceed the typical three-credit format and offer it for up to six credits in various formats. Two programs offer it for eight credits as a sequence of four two-credit courses. The problem of definition surfaces here because programs appear to define teaching research in at least two ways: as a single research methodology course or as a sequence of courses.

In contrast to Linesch's (1992) finding that 36% of programs offered research within the art therapy program, our survey revealed that 58% teach the course within the art therapy program. Locating the course within the program might provide a rich venue in which to tailor course content and methodologies to art therapy clinical practice and to integrate it within the whole program. We wonder whether the challenges of integrating research are greater when the course is taught outside the department. In these cases, are there opportunities for students to implement research knowledge within their department?

Parts II and III Findings

Whether they are art therapy faculty or from a related field, 71% of the instructors who teach research hold a doctorate; of these, 33% identified themselves as art therapists. Master's-level faculty (29%) teach research in only six programs. Doctoral- and master's-level research instructors differ in the degree to which they focus the research course. Findings from Parts II and III show that doctoral-level faculty (both art therapists and those with doctorates in other fields) teach fewer content areas (mean = 2.6) than the more inclusive master's-level instructors (mean = 4.33).

Based on two questions, there appears to be a slight trend favoring the teaching of qualitative orientations. This contrasts with Linesch's (1992) finding that 49% favored quantitative methods and 43% taught qualitative methods. In both Linesch's survey and ours respondents could check more than one option; these categories are not mutually exclusive. In our survey, the most frequently selected major course topic is qualitative research (92%) with quantitative research (88%) a close second choice. The ways many questions are answered suggest that many view qualitative and art-based methods as closely related. So, it is not clear whether respondents perceive art-based methods as a separate method, as a qualitative method, or as amenable to both qualitative and quantitative approaches, as Julliard et al. (2000) and McNiff (1998b) have suggested.

In viewing the diversity of approaches selected, half the programs selected three or more research orientations, and of these, six selected all orientations. The diversity of approaches is consistent with the growing body of art therapy literature calling for a range of approaches (e.g., Anderson, 2001; Kaplan, 2001). However, some programs limit their orientation: eight programs selected only two orientations, and four programs indicated only one orientation.

It is interesting that action research was selected only in combination with at least two other methods, and none of the respondents referred to it in their comments. However, this is consistent with responses to goals for research. "Integrating research and art therapy practice" was selected the least among the goals (42% of the programs). In contrast, Linesch (1992) found that the major goals for teaching research supported the acquisition of clinical skills.

Five choices were provided for the program's primary orientation: action research, statistical methods, art-based research, quantitative research, and qualitative research. Quantitative and qualitative research methodologies were not broken down into distinct methods (experimental, descriptive, ethnographic, phenomenological, etc.). Had we provided a comprehensive selection, responses might have been clearer.

Part IV Findings

Respondents strongly recommended viewing teaching and learning about research as a way to promote critical thinking and to integrate research and practice. Some educators suggested placing research at the core of the curriculum; they view research as invaluable to students' development as reflective practitioners. In the light of findings in previous sections of this survey, it seems that integration of research is a goal educators recognize as important but still struggle to attain. Only 58% of the programs offer research within the art therapy department, which may impede its integration. Although integrating research and practice was emphasized in this part of the survey, it was not selected that often as a priority goal in the preceding section. This is consistent with membership surveys in which few members list research as a job task. Based on our survey, however, it is not possible to know whether this is the result of a lack of interest or a lack of opportunity and support in the institutions where art therapists work.

It is of special interest that most educators perceive the research course to be challenging for students, yet they also perceive it as contributing in an important way to students' professional growth and clinical competence. Some educators point to art therapy students' visual, art-based learning style as a barrier to research thinking. However, only a minority integrate artmaking into their research instruction. Our survey indicates that educators present a wide range of research approaches in their courses, which may suggest a commendable openness and willingness to explore many alternatives. However, it may also suggest a lack of focus and clarity in setting goals for the research requirement. Further evidence for this is seen in that many educators are unwilling to prioritize course goals that would promote a clear conceptualization for research teaching. This leads us to wonder whether students who "fear" research may be overwhelmed with the amount and range of information presented to them.
Conclusions

Based on the current survey results and the literature reviewed, it is apparent that the field continues to explore research methods and approaches to teaching research. Because it appears that qualitative methods may be taught slightly more frequently than quantitative methods, we need to know how art therapy educators define qualitative research and how they conceptualize teaching it. Overall, more discussion and literature are needed to define and differentiate among the various approaches.

In relation to this, results suggest that educators not only teach many methodological approaches, but they also vary considerably on major course goals and topics. Because many select all or nearly all the methods, goals, and topics, we wonder whether this indicates a perceived need to teach everything related to research or a need for better conceptualization of how research is taught at the master’s level. It is notable that faculty with doctorates chose fewer goals and topics, suggesting they might be better able to adequately conceptualize and focus how they teach the course. It also appears that about half the programs require students to conduct a research study; however, another survey is needed to determine what constitutes a research study and the number of programs that make this a requirement for graduation. The ways several questions were answered suggest some programs continue to require research assignments other than conducting studies, consistent with Linesch’s (1992) findings.

More emphasis is needed on the importance of choosing the methodology that is appropriate to the research question, as many have stated (e.g., Creswell, 1994; Rosal, 1998). Another issue of importance is to consider whether this wide range of methods can be adequately taught within a course of three credits. Previous publications and panel discussions (Rosal et al., 1995) addressed the question of which methods and goals may be appropriate for a master’s-level research course. It appears from our survey that this discussion needs to continue.

Another issue of importance is teaching methods. It is notable that few respondents wrote in the use of art materials to facilitate understanding. In retrospect, we should have included artmaking in our response choices. This is an area that appears to be prominent in the minds of some educators and is certainly consistent with art therapy practice. Furthermore, creative approaches to teaching research may reduce students’ fears and resistance and tap their specific abilities as suggested by educators. More literature on pedagogy that focuses on how artmaking can be integrated into the research course, gather data in practice. To facilitate this, training programs might implement artmaking within the research course, gather data in the process, and analyze and report their findings.

This study indicates we need more information on best practices for teaching art therapy research. More specific data are needed on how educators view the trend toward teaching qualitative methods, what competencies they expect from their graduates, and how they define and conceptualize teaching art therapy research. Our field should continue a scholarly dialogue that articulates sound rationales for undertaking and teaching a range of approaches and for conceptualizing how this can be done given a program’s resources, the needs of our field, and our students’ needs and abilities.

References


Appendix A: Teaching Research: A Survey of Art Therapy Educators

Part I: Who teaches research courses to art therapy students?
1. Is a research course part of your art therapy program?
   ________ Yes ________ No
If yes, go on to Question 2.
If no, please share your position on the inclusion of research in your program, then proceed to the last question on page 4: #18, regarding phone survey.
2. How long has it been offered? ___________ years
3. Is it required or elective for art therapy students?
   ________ Required ________ Elective
4. How many credits are earned?
   Semester Credits _______ Other_______
5. What department(s) offers the course?
   □ Art Therapy
   □ Psychology
   □ Education
   □ Art Education
   □ Art History
   □ Interdisciplinary
   □ Other:___________________________
6. Who teaches the research course?
   (Check all that apply.)
   □ Doctoral Level Faculty in ____________
   □ Master's Level Faculty in_____________
   □ Registered Art Therapist_____________
   □ Full-Time Faculty in________________
   □ Part-Time or Adjunct Faculty in_______
   □ Other:___________________________

Part II: What is the content of the course(s)?
7. What is the primary orientation of the research course?
   □ Quantitative Research Methods
   □ Qualitative Research Methods
   □ Action Research Methods
   □ Statistical Methods
   □ Art-Based Research
   □ Developing Research Questions
   □ Implementing Research Projects
   □ Literature Search
   □ Critique of Research Literature
   □ Writing Review & Critique of Research Literature
   □ Writing Research Proposal
   □ Ethical Considerations
   □ Other:___________________________
8. What are the goals of the research course? (Prioritize, from 1 = most important to 5 = least important.)
   _______ Understanding & reviewing published research
   _______ Reflecting on clinical work in a systematic way
   _______ Learning about research method(s)
   _______ Formulating research questions
   _______ Developing research strategies
   _______ Conducting research projects
   _______ Integrating research and art therapy practice
   _______ Other:___________________________
9. What are the major topics in the Research Course? (Check all that apply.)
   □ Quantitative Research Methods
   □ Qualitative Research Methods
   □ Action Research Methods
   □ Art-Based Research
   □ Statistical Methods
   □ Developing Research Questions
   □ Implementing Research Projects
   □ Literature Search
   □ Critique of Research Literature
   □ Writing Review & Critique of Research Literature
   □ Writing Research Proposal
   □ Ethical Considerations
   □ Other:___________________________

Part III: What teaching methods are used?
10. What teaching methods are used? (Check all that apply.)
    □ Lecture
    □ Student-Developed Research Questions, Proposals, Projects
    □ Assigned Research Projects
    □ Discussion
    □ Readings from a Textbook
    □ Readings from Journal Articles
    □ Other:___________________________
11. What textbook(s) do you use? (Please give author, title, date, publisher.)
12. What are some other required readings?
    □ AATA Research Monograph
    □ Art Therapy Brief Reports
    □ Research readings from other art therapy journals
    □ Research readings form related field journals
    □ Articles? _________________________
13. If you would be willing to share your research course syllabus with other art therapy educators, please give us a way to contact you. You may respond by e-mail, phone, or use the enclosed postcard.

Part IV: Experiences
14. Based on your experiences, what recommendations would you give for integrating research into the art therapy curriculum?
15. What are some of the benefits of having art therapy research in your program?
16. What are some of the challenges of having art therapy research in your program?
17. Is your program AATA-approved?
   ________ Yes ________ No
18. Would you be willing to participate in a follow-up phone survey? If so, please complete and mail the enclosed postcard.
## Appendix B: Textbooks Used to Teach Research (N = 19)

<table>
<thead>
<tr>
<th>Textbook</th>
<th>No. Programs</th>
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