AATA Chapter Art Therapy Licensure Check List

Steps for Organizing an Effective Licensure Campaign

1. **Notify chapter members of licensure effort.** Inform members that the chapter is organizing a state licensure campaign. Explain why gaining a separate professional art therapy license is needed and important, and ask them to join in the effort.

2. **Survey chapter members.** Request members to provide information about themselves that will be needed to build the case for licensure *(either as part of step 1 or a follow-up contact)*.

   Requested information should include: (1) licenses held; (2) ATCB credentials; (3) academic degrees and academic programs; (4) level of training and practice *(general, clinical, other)*; (5) focus of practice *(e.g., children, families, seniors, etc.)*; (6) years of practice in the state; (7) organizations or agencies where employed or affiliated; (8) difficulties encountered in trying to obtain licensure in the state; (9) campaign organizing experience or special talents; (10) any relationships with legislators or state officials. *ATTA can provide examples of member surveys that chapters have used in other states.*

3. **Organize or expand your licensure committee.** Recruit members for your licensure leadership group that include:
   - Members with experience working with important constituencies *(e.g., seniors, K-12 children, persons with developmental or emotional disabilities, veterans, etc.)* that can explain to legislators how art therapy is practiced in different settings and benefits key constituencies;
   - Members representing different geographic regions of the state;
   - Members affiliated with art therapy academic programs in the state;
   - Members with needed organizing experience or skills *(e.g., public relations, advocacy, promotional writing, etc.)*.

4. **Begin collecting member practice information and endorsement letters.** Make follow up contacts with members to ask them to provide important information you will need for presentations to legislators and agency officials, including:
   - Examples from their practice of how art therapy has benefited important groups and constituencies in the state.
   - Descriptions of harm or potential harm to individuals in the state caused by persons claiming to be art therapists or practicing art therapy without appropriate training.
   - Letters endorsing art therapy and/or state licensure of art therapists from the organizations, agencies or employers identified in survey responses. Members should request that letters be addressed to the chapter president *(to allow their use in different presentations)*, and offer any needed examples of endorsement letters *(which AATA staff can provide)*.
5. **Investigate if your State requires “Sunrise Reviews” for licensure.** Research your state’s licensing process and requirements to find if there is a legislative or administrative requirement to submit a “sunrise review” application as a preliminary step for introducing licensure bills. One-third of the states have some form of sunrise review process, ranging from legislative staff review to formal agency proceedings, to make recommendations relating to the need for licensure, potential costs to the state, and appropriate levels of regulation for a profession. *Applications for review can require most of the information you’ve collected in steps 2 and 4.*

6. **Identify the most appropriate structure for licensure.** Identify the most appropriate state board or agency to administer the professional art therapy license that will present the fewest obstacles to licensure in terms of regulatory structures and costs, as well as potential opposition and denial of licensure by competing mental health professions. Gaining licensure should be your foremost consideration, not how the license or licensing agency might be perceived by other professions. Important steps to consider:

   a. If a majority of your chapter members already hold licenses as an LPC or MFT, and art therapists have had a supportive or positive working relationship with the profession, then consider as a first option adding a separate art therapy license under the appropriate professional licensing board, or a composite behavioral sciences board that licenses that profession. *The ability of art therapists to determine licensing standards and procedures, either as board members or a separate advisory committee, will be an important factor in evaluating this licensure option.*

   b. If these conditions don’t exist, investigate whether the state provides one or more options for licensing health professions directly by state agencies. In an effort to reduce administrative costs associated with professional licensing, states legislatures have created separate state agencies to issue and regulate professional licenses, increased the responsibilities of the secretary of state’s office or departments of health to include direct licensure of health-related professionals, or have expanded older medical boards to include separate licensing of allied health professions. *AATA staff can help identify opportunities for direct licensure with state agencies in your state.*

   c. Additional and more specialized options for licensure may also exist in states that have enacted programs to address autism, drug and alcohol abuse, Alzheimer’s or other specific conditions, or to expand access to mental health services to underserved groups or communities. Many of these bills provide separate state licenses to qualify mental health practitioners to provide assessment and treatment services for these conditions or groups, and may provide licensure as an interim step to gaining a separate art therapy license. In several states, Departments of Education also provide licensure generally for professional groups, such as speech and language
therapists, where large numbers of the profession are employees or contractors with school systems.

7. **Identify appropriate levels of licensure.** Based on the survey responses of chapter members, determine the academic and experience levels of the majority of art therapists in the state, as well of the level of licenses required by the organizations, institutions, networks or state programs where most art therapists are employed. Proposed licensing requirements should seek to be as inclusive of as many members as possible to gain their interest and support for licensure. This may include a single license or multiple licenses (i.e., an entry-level license to cover art therapy master’s graduates engaged in supervised practice or non-clinical practice; a professional art therapy license based on ATCB board certification; a clinical-level license to qualify licensees for private insurance reimbursement and independent practice; etc.). The level and number of licenses should reflect the needs and interests of chapter members in the state, but may also need to correspond to comparable licenses for mental health professions regulated under a common statute or licensing board.

8. **Identify chapter members who might not meet licensing requirements.** Given the diversity in degree requirements for art therapy programs both currently and in the past, it is likely that some art therapists may still not qualify under the licensing requirements you are proposing. It is important to understand how these individuals are excluded so an alternative approach for licensure can be included in the “grandmother” or transition provisions of a bill. These provisions allow a period of time after enactment of a bill (typically one year from the bill’s effective date) in which specific requirements for licensure are waived and licenses awarded to individuals who have been engaged in the practice of art therapy in the state for a specified number of years. Having the unified interest and support of all chapter members, especially in states with smaller numbers of art therapist, can be critical for the success of a licensure effort.

9. **Prepare an initial draft of your licensure bill.** While the final versions of bills that are introduced during legislative sessions typically are drafted by the relevant House or Senate legal counsel, or by a common bill drafting office, it is still important to prepare a fairly complete draft bill, or bill outline, to make available to potential bill sponsors, provide in initial meetings with licensing agencies or boards, and include as part of sunrise review applications. A draft bill is essential to assure that the topics, standards and protections you want the bill to address will be included in the final bill, and that the specific wording you need is used to define art therapy, the scope of practice of art therapy, and specific licensing requirements. Uniformity in these key sections is extremely important in creating a common professional identity for art therapists, providing uniform standards of training and practice to qualify for national programs, and providing license portability among states.
With approval of art therapy program accreditation standards by the Commission on Accreditation of Allied Health Education Programs (CAAHEP), the art therapy profession now will have a nationally recognized program for accrediting for art therapy master’s degree programs. It may be helpful to highlight prospective independent accreditation of art therapy programs as increasing numbers of state boards and agencies are looking to professional certification and accrediting bodies to reduce the costs of administering new licenses. This can be done by adding language in licensure bills to allow a transition period during which applicants may qualify for licensure with degrees from art therapy programs that were either approved by AATA or accredited by CAAHEP at the time the degrees were conferred. As more programs become accredited either in a specific state or nationally, more specific language can be added to qualify applicants holding master’s degrees from a CAAHEP accredited program in art therapy after a future date specified in the licensure bill.

*AATA will provide model legislative language to define art therapy, art therapy scope of practice and requirements for licensure. Staff can also identify relevant approaches to address issues related to title protection, licensure exemptions, grandfather provisions, and transition provisions to accredited clinical-level licensing that conform to each state’s licensing code structure.*

10. **Prepare information and advocacy materials.** The final planning step is preparing the materials chapter members will need to make the case for licensure with potential bill sponsors, licensing agencies and boards, supporting organizations, and members of legislative committees with jurisdiction over licensing of health professionals. These documents should include:

- A formal art therapy licensure proposal. *AATA can provide a model licensure proposal that includes general information for building the case for art therapy licensure, and identifies the state-specific information to be included.*
- Informational packets with separate documents that explain art therapy, identify your chapter and national affiliations, describe the practice of art therapy in the state, build the case for an art therapy license, summarize the licensing bill, and answer other questions. *Examples of these documents are available in the public policy sections of AATA’s Member’s Only website.*
- Talking Points and sample letters for members to use when contacting state legislators.

11. **Keep members informed and motivated.** Members need to be kept informed in emails and newsletters about the actions and progress resulting from the above steps and, when possible, asked for their input and assistance. Consider assigning some of the tasks associated with these steps to different members who express interest as a way to avoid overwhelming your licensure leadership group and letting the organizing process stall. The more chapter members hear about licensure and the broader their involvement in the planning stages of the licensure effort, the more knowledgeable and committed they will be in pursuing the remaining, and important, task of advocating with legislators to win passage of an art therapy licensure bill.