

AMERICAN ART THERAPY ASSOCIATION ETHICAL PRINCIPLES FOR ART THERAPISTS

(Approved by AATA Board of Directors: March 29, 2003)

AATA MISSION STATEMENT

The American Art Therapy Association, Inc., is an organization of professionals dedicated to the belief that the creative process involved in the making of art is healing and life-enhancing.

Its mission is to serve its members and the general public by providing standards of professional competence and developing and promoting knowledge in and about the field of art therapy.

PREAMBLE

This Ethics Document is intended to provide principles to cover many situations encountered by art therapists. Its goals are to safeguard the welfare of the individuals and groups with whom art therapists work and to promote the education of members, students, and the public regarding ethical principles of the art therapy discipline.

In this Ethics Document, the term *reasonable* means the prevailing professional judgment of art therapists engaged in similar activities in similar circumstances, given the knowledge the art therapist had or should have had at the time.

This Ethics Document applies to art therapists' professional activities across a wide variety of contexts, such as in person, postal, telephone, and Internet and other electronic transmissions. These activities shall be distinguished from the private conduct of art therapists, which is not within the purview of this document.

The development of a vigorous set of ethical principles for art therapists' work-related behavior requires a personal commitment and constant effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues; and to consult with others concerning ethical problems. This ethics document defines and establishes principles of ethical behavior for current and future members of this association and informs credentialing bodies, employers of art therapists, and the general public that members of the American Art Therapy Association, Inc., are required to adhere to the Ethical Principles for Art Therapists.

ETHICS COMMITTEE STATEMENT OF PURPOSE

The Ethics Committee is the committee charged by the American Art Therapy Association, Inc. (AATA), to educate the membership regarding issues of ethical practice and to maintain and encourage adherence to its Ethical Code and Principles of Practice.

ETHICAL PRINCIPLES FOR ART THERAPISTS

The Board of Directors of the American Art Therapy Association (AATA) hereby promulgates, pursuant to Article VIII, Sections 1, 2, and 3 of the Association Bylaws, a Revised Code of Ethical Principles for Art Therapists. Members of AATA abide by these principles and by applicable laws and regulations governing the conduct of art therapists and any additional license or certification that the art therapist holds.

PRINCIPLES

1.0 RESPONSIBILITY TO CLIENTS

Art therapists endeavor to advance the welfare of clients, respect the rights of those persons seeking their assistance, and make reasonable efforts to ensure that their services are used properly.

- 1.1. Art therapists do not discriminate against or refuse professional service to anyone on the basis of age, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.
- 1.2. At the outset of the client-therapist relationship, art therapists discuss and explain client rights, roles of both client and therapist, and expectations and limitations of the art therapy process.
- 1.3. Where the client is a minor, any and all disclosure or consent required is obtained from the parent or legal guardian of the minor client, except where otherwise mandated by law. Care is taken to preserve confidentiality with the minor client and to refrain from disclosure of information to the parent or guardian that might adversely affect the treatment of the client.
- 1.4. Art therapists respect the rights of clients to make decisions and assist them in understanding the consequences of these decisions. Art therapists advise their clients that decisions on the status of therapeutic relationships are the responsibility of the client. It is the professional responsibility of the art therapist to avoid ambiguity in the therapeutic relationship and to strive for clarity of roles at all times.
- 1.5. Art therapists refrain from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the art therapist's competence or effectiveness in performing his or her functions as an art therapist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists.

A multiple relationship occurs when an art therapist is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the art therapist has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person.

Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical.

Art therapists recognize their influential position with respect to clients, and they do not exploit the trust and dependency of clients.

- 1.6. Art therapists refrain from engaging in an activity when they know or should know that there is a substantial likelihood that their personal problems will prevent them from performing their work-related activities in a competent manner.
- 1.7. Art therapists refrain from taking on a professional role when (1) personal, professional, legal, financial, or other interests and relationships could reasonably be expected to impair their competence or effectiveness in performing their functions as art therapists, or (2) expose the person or organization with whom the professional relationship exists to harm or exploitation.
- 1.8. Art therapists terminate therapy when it becomes reasonably clear that the client no longer needs the service, is not likely to benefit, or is being harmed by the continuing service.
- 1.9. Art therapists do not engage in therapy practices or procedures that are beyond their scope of practice, experience, training, and education. Art therapists assist persons in obtaining other therapeutic services if the therapist is unable or unwilling to provide professional help, or where the problem or treatment indicated is beyond the scope of practice of the art therapist.
- 1.10. Art therapists, prior to termination, provide pre-termination counseling and suggest alternate service providers as appropriate, except where precluded by the actions of clients or third-party payers.
- 1.11. Art therapists strive to provide a safe, functional environment in which to offer art therapy services. This includes:
 - a. proper ventilation;
 - b. adequate lighting;
 - c. access to water;
 - d. knowledge of hazards or toxicity of art materials, and the effort needed to safeguard the health of clients;
 - e. storage space for artwork and secured areas for any hazardous materials;
 - f. allowance for privacy and confidentiality;
 - g. compliance with any other health and safety requirements according to state and federal agencies which regulate comparable businesses.

2.0 CONFIDENTIALITY

Art therapists protect confidential information obtained from clients, through artwork and/or conversation, in the context of the professional relationship while clients are in treatment and post-treatment.

- 2.1. Art therapists treat clients in an environment that protects privacy and confidentiality.
- 2.2. Art therapists inform clients of the limitations of confidentiality.
- 2.3. Art therapists do not disclose confidential information for the purposes of consultation and supervision without client's explicit consent unless there is reason to believe that the client or others are in immediate, severe danger to health or life. Any such

disclosure must be consistent with laws that pertain to the welfare of the client, family, and the general public.

- 2.4. In the event that an art therapist believes it is in the interest of the client to disclose confidential information, he/she seeks and obtains written consent from the client or client's guardian(s) when possible before making any disclosures, unless there is reason to believe that the client or others are in immediate, severe danger to health or life.
- 2.5. Art therapists disclose confidential information when mandated by law in a civil, criminal, or disciplinary action arising from such art therapy services. In these cases client confidences may be disclosed only as reasonably necessary in the course of that action.
- 2.6. Art therapists maintain client treatment records for a reasonable amount of time consistent with state regulations and sound clinical practice, but not less than seven years from completion of treatment or termination of the therapeutic relationship. Records are stored or disposed of in ways that maintain confidentiality.

3.0 ASSESSMENT METHODS

Art therapists develop and use assessment methods to better understand and serve the needs of their clients. They use assessment methods only within the context of a defined professional relationship.

- 3.1. Art therapists who use standardized assessment instruments are familiar with reliability, validity, standardization, error of measurement, and proper application of assessment methods used.
- 3.2. Art therapists use only those assessment methods in which they have acquired competence through appropriate training and supervised experience.
- 3.3. Art therapists who develop assessment instruments based on behavioral science research methods follow standard instrument development procedures. They specify in writing the training, education, and experience levels needed to use such instruments.
- 3.4. Art therapists obtain informed consent from clients regarding the nature and purpose of assessment methods to be used. When clients have difficulty understanding the language or procedural directives, art therapists arrange for a qualified interpreter.
- 3.5. In selecting assessment methods and reporting the results, art therapists consider any factors that may influence outcomes, such as culture, race, gender, sexual orientation, age, religion, education, and disability. They take reasonable steps to ensure that the results of their assessments are not misused by others.
- 3.6. Art therapists take reasonable steps to ensure that all assessment artwork and related data are kept confidential according to the policies and procedures of the professional setting in which these assessments are administered.

4.0 CLIENT ARTWORK

Art therapists regard client artwork as the property of the client. In some practice settings client artwork, or representations of artworks, may be considered a part of the clinical record retained by the therapist and/or agency for a reasonable amount of time consistent with state regulations and sound clinical practice.

- 4.1. Client artwork may be released to the client during the course of therapy and upon its termination. The client is notified in instances where the art therapist and/or the clinical agency retain copies or photographic reproductions of the artwork in the client file as part of the clinical record.
- 4.2. Art therapists obtain written informed consent from the client or, where applicable, a legal guardian in order to keep client artwork, copies, slides, or photographs of artwork, for educational, research, or assessment purposes.
- 4.3. Art therapists do not make or permit any public use or reproduction of client art therapy sessions, including dialogue and artwork, without written consent of the client.
- 4.4. Art therapists obtain written informed consent from the client or, where applicable, a legal guardian before photographing clients' artwork or video taping, audio recording, otherwise duplicating, or permitting third-party observation of art therapy sessions.
- 4.5. Art therapists use clinical materials in teaching, writing, and public presentations if written authorization has been previously obtained from the clients. Reasonable steps are taken to protect client identity and to disguise any part of the artwork or video tape that reveals client identity.
- 4.6. Art therapists obtain written, informed consent from the client before displaying client art in any public place.

5.0 PROFESSIONAL COMPETENCE AND INTEGRITY

Art therapists maintain high standards of professional competence and integrity.

- 5.1. Art therapists keep informed of developments in their field through educational activities and clinical experiences.
- 5.2. Art therapists diagnose, treat, or advise on problems only in those cases in which they are competent, as determined by their education, training, and experience.
- 5.3. Art therapists cooperate with other professionals, when indicated and professionally appropriate, in order to serve their clients effectively
- 5.4. Art therapists, because of their potential to influence and alter the lives of others, exercise reasonable care when making public their professional recommendations and opinions through testimony or other public statements.
- 5.5. Art therapists do not engage in any relationship with clients, students, interns, trainees, supervisees, employees, research participants, or colleagues that is exploitative by its nature.
- 5.6. Art therapists do not distort or misuse their clinical and research findings.

- 5.7. Art therapists do not knowingly engage in behavior that is harassing or demeaning to persons with whom they interact.

6.0 MULTICULTURAL AWARENESS

Art therapists are aware of and respect cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status and consider these factors when working with members of such groups. Art therapists try to eliminate the effect on their work of biases based on those factors, and they do not knowingly participate in or condone activities of others based upon such prejudices.

- 6.1. Art therapists take reasonable steps to ensure that they are sensitive to differences that exist among cultures. They are earnest in their attempts to learn about the belief systems of people in any given cultural group in order to provide culturally relevant interventions and treatment.
- 6.2. Art therapists are aware of their own values and beliefs and how they may affect cross-cultural therapy interventions.
- 6.3. Art therapists obtain education about and seek to understand the nature of social diversity and oppression with respect to race, ethnicity, national origin, color, gender, sexual orientation, class, age, marital status, political belief, religion, and mental or physical disability.
- 6.4. Art therapists acquire knowledge and information about the specific cultural group(s) with which they are working and the strengths inherent in that cultural group. They are sensitive to individual differences that exist within the cultural group and understand that individuals may have varying responses to group norms.
- 6.5. When working with people from cultures different from their own, art therapists engage in culturally sensitive supervision, seek assistance from members of that culture, and make a referral to a professional who is knowledgeable about the culture when it is in the best interest of the client to do so.

7.0 RESPONSIBILITY TO STUDENTS AND SUPERVISEES

Art therapists instruct their students using accurate, current, and scholarly information and will foster the professional growth of students and advisees.

- 7.1. Art therapists as teachers, supervisors, and researchers maintain high standards of scholarship and present accurate information.
- 7.2. Art therapists are aware of their influential position with respect to students and supervisees, and they avoid exploiting the trust and dependency of such persons. Art therapists, therefore, shall not engage in a therapeutic relationship with their students or supervisees.
- 7.3. Art therapists take reasonable steps to ensure that students, employees or supervisees do not perform or present themselves as competent to perform professional services beyond their education, training, and level of experience.

- 7.4. Art therapists who act as supervisors are responsible for maintaining the quality of their supervision skills and obtaining consultation or supervision for their work as supervisors whenever appropriate.
- 7.5. Art therapists do not require students or supervisees to disclose personal information in course- or program-related activities, either orally or in writing, regarding sexual history, history of abuse and neglect, psychological treatment, and relationships with parents, peers, spouses or significant others, except when (1) the program or training facility has clearly identified this requirement in its admissions and program materials or (2) the information is necessary to evaluate or obtain assistance for students whose personal problems could reasonably be judged to be preventing them from performing their training or professional related activities in a competent manner or whose personal problems could reasonably be judged to pose a threat to the students or others.

8.0 RESPONSIBILITY TO RESEARCH PARTICIPANTS

Art therapy researchers respect the dignity and protect the welfare of participants in research.

- 8.1. Researchers are guided by laws, regulations, and professional standards governing the conduct of research.
- 8.2. To the extent that research participants may be compromised by participation in research, investigators seek the ethical advice of qualified professionals not directly involved in the investigation and observe safeguards to protect the rights of research participants.
- 8.3. Researchers requesting participants' involvement in research inform them of all aspects of the research that might reasonably be expected to influence willingness to participate. Investigators take all reasonable steps necessary to ensure that full and informed consent has been obtained from participants who are also receiving clinical services, have limited understanding and/or communication, or are minors.
- 8.4. Researchers respect participants' freedom to decline participation in, or to withdraw from, a research study at any time with no negative consequences to their treatment.
- 8.5. Information obtained about a research participant during the course of an investigation is confidential unless there is authorization previously obtained in writing. When there is a risk that others, including family members, may obtain access to such information, this risk, together with the plan for protecting confidentiality, is to be explained as part of the procedure for obtaining informed consent.

9.0 RESPONSIBILITY TO THE PROFESSION

Art therapists respect the rights and responsibilities of professional colleagues and participate in activities that advance the goals of art therapy.

- 9.1. Art therapists adhere to the ethical principles of the profession when acting as members or employees of organizations.

- 9.2. Art therapists attribute publication credit to those who have contributed to a publication in proportion to their contributions and in accordance with customary professional publication practices.
- 9.3. Art therapists who author books or other materials that are published or distributed appropriately cite persons to whom credit for original ideas is due.
- 9.4. Art therapists who author books or other materials published or distributed by an organization take reasonable precautions to ensure that the organization promotes and advertises the materials accurately and factually.
- 9.5. Art therapists value participation in activities that contribute to a better community and society.
- 9.6. Art therapists recognize the importance of developing laws and regulations pertaining to the field of art therapy that serve the public interest, and with changing such laws and regulations that are not in the public interest.
- 9.7. Art therapists cooperate with the Ethics Committee of the American Art Therapy Association, Inc., and truthfully represent and disclose facts to the Ethics Committee when requested.
- 9.8. Art therapists take reasonable steps to prevent distortion, misuse, or suppression of art therapy findings by any institution or agency of which they are employees.

10.0 FINANCIAL ARRANGEMENTS

Art therapists make financial arrangements with clients, third-party payers, and supervisees that are understandable and conform to accepted professional practices.

- 10.1. When art therapists pay, receive payment from, or divide fees with another professional, other than in an employer-employee relationship, the payment to each is based on the services provided (clinical, consultative, administrative, or other) and is not based on the referral itself.
- 10.2. Art therapists do not financially exploit their clients.
- 10.3. Art therapists disclose their fees at the beginning of therapy and give reasonable notice of any changes in fees.
- 10.4. Art therapists represent facts truthfully to clients, third-party payers, and supervisees regarding services rendered and the charges for services.
- 10.5. Art therapists may barter only if (1) it is not clinically contraindicated and (2) the resulting arrangement is not exploitative. Barter is the acceptance of goods, services, or other non-monetary remuneration from clients/patients in return for art therapy services.

11.0 ADVERTISING

Art therapists engage in appropriate publicity regarding professional activities in order to enable lay persons to choose professional services on an informed basis.

- 11.1. Art therapists accurately represent their professional competence, education, training, and experience.
- 11.2. Art therapists do not use a name that is likely to mislead the public concerning the identity, responsibility, source, and status of those under whom they are practicing, and do not hold themselves out as being partners or associates of a firm if they are not.
- 11.3. Art therapists do not use any professional identification (such as a business card, office sign, letterhead, or telephone or association directory listing) if it includes a statement or claim that is false, fraudulent, misleading, or deceptive. A statement is false, fraudulent, misleading, or deceptive if it: a) fails to state any material fact necessary to keep the statement from being misleading; b) is intended to, or likely to, create an unjustified expectation; or c) contains a material misrepresentation of fact.
- 11.4. Art therapists correct, whenever reasonable, false, misleading, or inaccurate information and representations made by others concerning the therapist's qualifications, services, or products.
- 11.5. Art therapists make certain that the qualifications of persons in their employ are represented in a manner that is not false, misleading, or deceptive.
- 11.6. Art therapists may represent themselves as specializing within a limited area of art therapy only if they have the appropriate education, training, and experience to practice in that specialty area.
- 11.7. AATA credentialed, professional, associate, and other members in good standing may identify such membership in AATA in public information or advertising materials, but they must clearly and accurately represent the membership category to which they belong.
- 11.8. Art therapists do not use the ATR® and/or ATR-BC following their name unless they are officially notified in writing by the Art Therapy Credential Board, Inc., that they have successfully completed all applicable registration and certification procedures. Art therapists may not use the initials "AATA" following their name as if it were an academic degree.
- 11.9. Art therapists may not use the AATA initials or logo without receiving written permission from the Association.

12.0 INDEPENDENT PRACTITIONER

An independent practitioner of art therapy is a Credentialed Professional Member of the American Art Therapy Association, Inc. (AATA), who is practicing art therapy independently and who is responsible for the delivery of services to clients where the client pays the therapist directly or through insurance for art therapy services rendered.

- 12.1. Independent practitioners of art therapy maintain their registration with the Art Therapy Credentials Board, Inc. (ATCB), and have, in addition to registration, at least two full years of full-time practice or 3,000 hours of paid clinical art therapy experience.

- 12.2. Independent practitioners of art therapy obtain qualified medical or psychological consultation for cases in which such evaluation and/or administration of medication is required.
- 12.3. Independent practitioners of art therapy must conform to laws that pertain to the provision of independent mental health practice.
- 12.4. Independent practitioners of art therapy confine their practice within the limits of their training. The art therapist neither claims nor implies professional qualifications exceeding those actually earned and received. The therapist is responsible for correcting any misrepresentation of these qualifications.

13.0 REFERRAL AND ACCEPTANCE

- 13.1. Independent practitioners of art therapy, upon acceptance of a client, specify to clients their fee structure, payment schedule, session scheduling arrangements, and information pertaining to the limits of confidentiality and the duty to report.
- 13.2. Independent practitioners of art therapy design treatment plans and document activity to assist the client in attaining maintenance of the maximum level of functioning and quality of life appropriate for each individual.
- 13.3. Independent practitioners of art therapy terminate art therapy when the client has attained stated goals and objectives, or fails to benefit from art therapy services.
- 13.4. Independent practitioners of art therapy communicate the termination of art therapy services to the client.

14.0 ART THERAPY BY ELECTRONIC MEANS

Art therapy by electronic means is a new and evolving application of art therapy. As such, it presents opportunities for service, as well as ethical dilemmas not encountered in the past. Art therapists are advised to use caution as the ethical ramifications of providing art therapy services via the Internet and other electronic means emerge.

- 14.1. Art therapists who offer services or information via electronic transmission inform clients of the risks to privacy and the limits of confidentiality.
- 14.2. Art therapists who provide services through electronic means are governed by the AATA Ethical Principles for Art Therapists.
- 14.3. Art therapists are responsible for taking reasonable steps to ensure that any services through electronic means are in accordance with all applicable laws and regulations and are aware of the licensing requirements of the states in which their clients reside.

15.0 ABIDING BY THE ETHICAL PRINCIPLES FOR ART THERAPISTS

By accepting membership in the American Art Therapy Association, Inc. (AATA), art therapists agree to abide by the AATA Ethical Principles for Art Therapists. It is the ethical responsibility of each member to act in accordance with these principles and to

comply with all applicable laws, regulations, and licensing requirements that govern the practice of therapy in each member's state. These principles are written to provide a basis for education and a foundation for ethical practice.

15.1. The AATA Bylaws, Article VIII, Section 1, authorizes the Ethics Committee to be a standing committee of the Association. The committee educates the membership as to the Ethical Principles for Art Therapists and has the responsibility to recommend and implement these principles as adopted by the Board of Directors of the Association and as may be amended from time to time.

15.2. Art therapists who have had their professional credentials revoked by the Art Therapy Credentials Board as a result of an ethics violation shall have their AATA membership terminated.

16.0 COMPLAINTS

16.1. Conflicts and disagreements are inherent in any organization and in any human interaction. Situations may occur in which one or more individuals believe that one or more AATA members may have violated the AATA Ethical Principles for Art Therapists.

16.2. Individuals who believe Art Therapy Credentials Board (ATCB) ethical standards or state licensing regulations have been violated should file complaints directly with those entities.

6/20/03