“When dealing with new situations we have to create new responses, whether this is around finding solutions or creating new ways to synthesize our experience. This notion of creativity is at the core of the art therapy ethos.”

— Art therapist, COVID-19 survey
Letter from the President

MARGARET CARLOCK-RUSSO

A MENTAL HEALTH CRISIS AMIDST A PANDEMIC

This year has brought unprecedented crises on top of personal and professional uncertainties. As art therapists, we're reimagining our practices during the Coronavirus pandemic—whether it's embracing teletherapy or finding ways to keep our patients and colleagues safe while we go to work in person, risking our own health. As family members, we are faced with new challenges, from homeschooling children to caring for aging parents remotely. Amidst all this, I personally thank you for your continued work to support the well-being of your clients, colleagues and community.

2020 has also forced our nation to reckon with racial injustice—and we must do our part to reverse systemic racism with long overdue and concrete changes within our field and our association. Under the leadership of the Board's Diversity, Equity, and Inclusion (DEI) Committee, we are conducting DEI Listening Sessions this winter, as one important step to gathering insight from various voices within the profession.

Even during this challenging year, I am proud of the work we have been able to accomplish together. We have supported a gamut of member needs relative to the pandemic, undertaken critical steps towards a commitment to DEI, hosted a successful virtual annual conference, passed legislation for licensure for art therapists in Virginia and Washington, DC—with ongoing art therapy legislative activity in more than 20 states! We also joined federal efforts to address mental health during this pandemic and in the aftermath of the killings of George Floyd, Breonna Taylor, and so many others.

It has become more evident than ever that people need to feel supported by their communities. I hope you will engage with AATA—whether you’re a long-time member, or new to the association. We grow as an organization when we support our members, advocate on the behalf of the profession, offer resources and community, and build awareness and respect by educating the public about who we are, what work we do and what stand for as a major mental health profession. On behalf of the AATA Board of Directors, I am so honored that you're a part of our association and our art therapy community.

Sincerely,

Margaret Carlock-Russo, EdD, LCAT(NY), ATR-BC, ATCS
OUR VISION

The services of licensed, culturally proficient art therapists are available to all individuals, families, and communities.

OUR MISSION

The mission of the American Art Therapy Association is to advocate for expansion of access to professional art therapists and lead the nation in the advancement of art therapy as a regulated mental health and human services profession.
ART THERAPISTS’ HEALTH AND SAFETY DURING THE CORONAVIRUS PANDEMIC

This year, due to the Coronavirus pandemic, we were reminded of the importance of mental health professionals as essential workers. Art therapists took on the role of frontline workers, going to work physically and putting themselves at risk of infection while taking on additional work when needed. All of this has taken a toll with art therapists, like other health care workers, feeling overwhelmed and fatigued.

According to our Coronavirus Survey Report, more than half (53.1%) of art therapists surveyed said that they are continuing to go to work in person. Among art therapists who said they were continuing to work in person, the vast majority (64.5%)—or one third (32.4%) of all survey takers—said they were considered to be “essential workers” by their employers.

While they are required to physically go to work, these “essential workers” reported their doubts about the safety measures and precautions in place at their job sites. When “essential workers” were asked whether social distancing guidelines were implemented adequately at their workplace, more than a third (37.1%) responded “no” or “somewhat,” or were “unsure.” Similarly, when asked whether there were procedures in place to disinfect art materials in their workplace, a quarter (25.2%) said “no,” “somewhat,” or that they were “unsure.”

Nearly one third of “essential” art therapists (30.5%) work in psychiatric hospital settings.

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<table>
<thead>
<tr>
<th>Setting</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Psychiatric Hospital Settings</td>
<td>30.5%</td>
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<tr>
<td>Outpatient Mental Health Clinics</td>
<td>16.8%</td>
</tr>
<tr>
<td>Private Practice</td>
<td>14.7%</td>
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<tr>
<td>Medical Hospital Settings</td>
<td>11.7%</td>
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<tr>
<td>Social Service Agencies/ Community Health Centers</td>
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<tr>
<td>Drug/Alcohol Programs or Rehab</td>
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</tr>
<tr>
<td>Residential Treatment</td>
<td>7.6%</td>
</tr>
<tr>
<td>Corrections Facilities</td>
<td>3.1%</td>
</tr>
<tr>
<td>Homeless Shelters</td>
<td>2.5%</td>
</tr>
</tbody>
</table>
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AATA IMPACT

• At the start of the pandemic in March 2020, we launched a COVID-19 resource hub on our website. There, our members could find posts related to their practice, including Best Practices for Using Art Supplies Hygienically during the COVID-19 Outbreak by Andrea Davis, ATR-BC, LPC-AT-S, which became one of our most visited articles in 2020, with nearly 20,000 pageviews. We also launched a weekly email to our members, making these resources available to them in their inbox each Tuesday. As the pandemic has continued, we now send the email as and when new information emerges.

• AATA also promptly hosted two webinars, "Mental Health on the Front Lines of COVID-19" and "Tools for Art Therapists to Care for Clients and Self during COVID-19," to help art therapists adapt their practices during the pandemic.


• In May, AATA launched a survey to hear from art therapists about how the Coronavirus and subsequent closures were affecting their practices and lives. At the time, 95% of Americans were under stay-at-home orders of some sort, more than 1.17 million people had contracted COVID-19, and 68,326 had died. Thanks to the participation of more than 600 art therapists, we were able to release the Coronavirus Pandemic Impact Report with both heartbreaking and hopeful stories and best practices.

“Walled Off” by Bani Malhotra, ATR, art therapy PhD student at Drexel University.

Artist’s statement: “Walled Off is the first of the encaustic triptych on the personal, social, political, and geographical impact of COVID-19. Here, I meditate on the process and allow the melted wax to control the background, similar to the pandemic that suddenly altered our lives with great intensity. Despite that, new pathways and doors continue to be carved in spite of feeling walled off.”
FOCUSING ON MENTAL HEALTH DURING THE CORONAVIRUS PANDEMIC

The Coronavirus pandemic has exposed and exacerbated a mental health crisis, and disrupted mental health care for many at a time when they need it most. More than half (53%) of adults in the United States reported that their mental health has been negatively impacted due to worry and stress over the Coronavirus, according to a Kaiser Family Foundation poll conducted in mid-July.

While art therapists have stepped out of their comfort zones to offer teletherapy and get creative virtually, many noted that some clients are hesitant to use teletherapy, citing discomfort with technology, not having private space to talk, or lacking access to technology.

AATA IMPACT

Especially during the pandemic, AATA is prioritizing mental health awareness and access to care. AATA joined our coalition partners in mental health, specialized instructional support personnel (SISP) in schools, and the arts in engaging with congressional COVID-19 relief package negotiations.

- AATA supported the COVID-19 Mental Health Research Act (H.R. 6645), which would direct the National Institute of Mental Health (NIMH) to conduct or support research on the mental health consequences of COVID-19.
- We also supported reciprocity for providers to practice in other states, which would make teletherapy much easier. The Temporary Reciprocity to Ensure Access to Treatment (TREAT) Act (S. 4421) would authorize providers that hold a valid license in any state (and is not barred in another state) to practice in every state during the national emergency and for a 180-day transition period after the declaration is lifted.
- AATA worked to highlight students’ needs for mental health support services. Delivered by Specialized Instructional Support Personnel (SISP), including art therapists, these services are especially important to assess students for trauma and support students experiencing mental health crises—and should be included in their state’s ESSA implementation plans.
- In May, the AATA DEI Committee released a statement on revisiting our values during Coronavirus: “Populations who lack resources and struggle with social injustices based on..."
cultural aspects, such as race, that are stigmatized by the healthcare system, have seen the worst of this pandemic.”

- In June, we partnered with the National Council for Behavioral Health for their first-ever Hill Day at Home to urge lawmakers to invest in lifesaving funding for mental health and addiction programs.

- In August, we released Mental Health Policy Implications during the Coronavirus Pandemic to identify the policy priorities which emerged from our Coronavirus survey findings.

- AATA President Margaret Carlock-Russo spoke about the role of art therapists in COVID-19 recovery during a New York State Senate meeting in October. She explained that there were two converging dynamics leading to increased demand for art therapy services: “More people are recognizing their own personal need for mental health support during these times when they are feeling displaced, uncertain, stress, anxiety, maybe joblessness, illness...” At the same time, they are “spontaneously turning to the arts as a way of coping.”

- In November, we joined the Mental Health Liaison Group in urging Congress to take urgent actions to address the unprecedented mental health and substance-use effects of the COVID-19 pandemic. Since the enactment of CARES Act in March, these effects have grown significantly and are rapidly undoing the hard-fought progress that Congress had made previously to address the long-standing mental health, addiction, and suicide crises.

“I work in a group home campus setting, and my clients have been quarantined to their homes for over a month... Staff are required to wear PPE, including face masks. Besides attempting to limit contact and the use of art materials, I’ve found wearing a mask to be most disruptive to the therapeutic process. Many of my clients have various communication challenges and rely on facial expressions to understand cues. With most of my face being covered, nonverbal communication is nearly impossible.

My stress related to their experiences has been heavy, as they have limited awareness regarding the need for social distancing, not touching your face, all the measures we know to keep ourselves safe. Because of this I’ve felt a stronger need to protect them from unnecessary harm and exposure.”

— Shelli McCaffrey, MA AATA Featured member, 4/22/2020

AATA At A Glance

A snapshot of our membership and how our members engaged with us in 2020.

4,247 MEMBERS
(As of 12/31/2020)

+8% INCREASE IN MEMBERSHIP
(Median increase for associations was 5% in 2020)

About our Members

Student 26%
Credentialed/Professional 66%
Retired 4%
International 4%

Member Satisfaction

81% CHOOSE TO RENEW
(Median renewal rate for associations was 81% in 2020)

What our Members Like Most about AATA
1. Networking with other art therapists
2. Access to the Journal
3. AATA resources
4. Conference

Member Engagement

371 Contributors to MyAATA Forum discussions
992 2020 Annual Conference
30+ Volunteer Committees
296 Volunteer AATA chapter officers
177 Mentees in AATA’s MentorMatch
86 Mentors (Mentors wanted!)
OUR GOAL IS TO SUPPORT MEMBERS
AT EVERY STAGE OF YOUR PROFESSIONAL JOURNEY

While our membership has remained fairly stable over the past five years, we see opportunities for growth and are committed to making changes and improvements to meet the needs of members, wherever they are today. Thank you for taking our membership survey and giving us feedback so we can understand your needs—and help improve how we recruit and retain the next generation of professionals and members.

At AATA, our goal is to support our members at every stage of their professional journey—as a student or new professional seeking mentorship, a long-time practitioner sharing best practices, or an educator looking for new ideas. We aim to offer our members access to all the reliable clinical and practice resources and education opportunities you need to advance your career.

As a member, we hope you rely on:

- **Art Therapy: Journal of the American Art Therapy Association**, our quarterly journal leading research, practice-based articles, and more.
- More networking opportunities than ever to engage with colleagues;
- The **Featured Member series**, which celebrates the work of our members, professionals and students alike, and helps you build standing in the profession;
- Free, no-cost referrals through our public **Art Therapist Locator** tool designed to help members grow their practice;
- Grassroots and legislative support to advance the profession through licensure and insurance reimbursement parity to grow the field and make art therapy services more available;
- Access to 131 hours of online continuing education sessions, and an additional 54 hours by the end of the year;
- Discounts on AATA Annual Conference registration fees and special events, as well as Continuing Education courses through the Institute for Continuing Education in Art Therapy; and
- A new 30% discount for select art supplies from Faber-Castell for AATA members!
This year, we overhauled our members-only website, so that you only need to log in one time to get access to everything membership offers. (We heard you—multiple sign-ons with multiple passwords were just too much!) We are delighted that by offering single sign-on, our members have started visiting our website more frequently for the information and resources they need, including:

- Online access to *Art Therapy: Journal of the American Art Therapy Association*;
- The **MyAATA Community**, an online forum where members can connect, support each other, and share resources;
- The **MentorMatch** program, which helps new professionals connect with seasoned practitioners; and
- The new **Student Corner** to enable art therapy students to connect with each other and showcase artwork to spark curiosity and collaboration.

As a member, you are also helping advance the field of art therapy. Every day, we work to build public awareness about the value of art therapy as a regulated mental health profession. We also educate lawmakers about how art therapy licensing and insurance reimbursement parity can protect the public and help more people access art therapy services.

None of this would be possible without you—our members! We hope to see you during our regular virtual member meetings!

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Ori Cruz, MPS, LCAT
AATA Featured Member, 6/17/2020

Ori has over 20 years of experience as an art therapist working in inpatient clinical hospital settings in various therapeutic capacities, including offering art therapy and supervising other therapeutic activities like cooking and exercise based groups. He currently works as an Art/Rehabilitation therapist with the department of state hospitals in Coalinga, California.

**How do you view your role as an art therapist or student during COVID-19?**

“The best way to answer this has been to take a Trauma Informed approach, and ask patients to share how they are doing with it all. This has taken place in a support group setting or even a one to one conversation. Giving them permission to not watch the news or to talk about things with peers/family etc. to preserve sanity has been paramount. Many were terrified and some acted like they could care less. Many have been very concerned with how treatment will be handled after they allow groups to happen once more.”

**COVID-19 response artwork by Ori Cruz.** Colored pencil, markers, stickers and metallic gold marker on construction paper. 2020.
Top 5 Most Read Articles Online in 2020

2. Navigating Loss Through Creativity: Influences of Bereavement on Creativity and Professional Practice in Art Therapy, by Rebecca Arnold
3. The Effects of Completing Mandalas on Mood, Anxiety, and State Mindfulness, by C. Estelle Campenni & Ashley Hartman
4. Art Therapy and Counseling for Fear of Childbirth: A Randomized Controlled Trial, by Helén Wahlbeck, Linda J. Kvist & Kajsa Landgren
5. Virtual Reality in Art Therapy: A Pilot Qualitative Study of the Novel Medium and Implications for Practice, by Girija Kaimal, Katrina Carroll-Haskins, Marygrace Berberian, Abby Dougherty, Natalie Carlton & Arun Ramakrishnan

154,700 articles downloaded in 2020 YTD

+26% compared to 2019 YTD downloads

TWO SPECIAL ISSUES IN 2020:
- Disability Studies and Art Therapy (Issue #2)
- Client Voices and Choices (upcoming Issue #4)

Issue #1 Cover: Research Stance by Marilyn Holmes.
Issue #2 Cover: Whitman and the Meandering River by Jennifer Radil.
Issue #3 Cover: Memoirs of Osiris: Rebirth by Jee Hyun Kim.
Issue #4 Cover: We Are All Fire Breathers by Berenice Badillo.
CULTIVATING THE NEXT GENERATION OF ART THERAPISTS (AND MEMBERS)

As the AATA board and national staff, we are constantly asking ourselves, how can we cultivate the next generation of members and art therapists?

First, we focus on diversity, equity, and inclusion. We want a profession and association that better reflects the communities we serve. This requires us to examine the pathways into our profession, and how we can ensure that more people from all walks of life consider art therapy as a career. At the same time, we respond to our members’ needs—which means continuously listening to them and involving them in all aspects of building and growing our association. And we must meet our members where they are, which means if they prefer more virtual content, we make sure that happens!

Second, we are working to reduce the barriers to participation. While the pandemic and social distancing has propelled us all into a virtual world, it’s shown us how webinars and virtual meetings can increase participation. For example, our 2020 Annual Conference had more participants than last year’s 50th Anniversary Conference! We have also adopted more family-friendly policies for in-person conferences to meet the needs of working parents, which we are looking forward to implement after the pandemic.

Next, we know that it’s not enough to bring new members into AATA. Those new members, and current ones as well, have to be engaged enough to want to remain in the association. That’s where we need your help. AATA cannot create transformative organizational change alone. We hope you will volunteer within our committees and chapters, and participate in programs such as Mentor Match, join in conversations in our MyAATA Member Forum or Student Corner—and share content about our profession with your community and networks. One of the biggest reasons people generally don’t get involved is because they were never asked! So if you know someone that would benefit from the AATA community (and the resources it offers), please invite them to join you for the next conference or chapter meeting.

“Bubbe-Meises” by Zachary Van Den Berg.
Oil on Canvas, 24”x36” 2020.

Artist’s Statement: “This painting, Bubbe-Meises (Yiddish for grandmother’s tales), is from my current series, Becoming. These works are responses to the journey of cultivating my professional identity as an art therapist. For the last seven months, I have been working closely with Judith A. Rubin. Bubbe-Meises is an homage to her wisdom and an expression of gratitude for her presence in my life.”
STATE CHAPTERS

The AATA cannot and will not succeed without the efforts of our state chapters and our locally elected leaders and volunteers. Thank you for sharing your stories and your time!

To improve our collaboration and to help share strategies and tactics with each other, we now host regularly scheduled virtual meetings for chapter leaders and the National Office. Bimonthly, approximately 30 member leaders and staff connect for a chance to share news and updates and learn from each other.

In particular, we want to highlight the incredible advocacy efforts of hundreds of volunteers across the country. Even during a year with many competing legislative priorities, our volunteers were undeterred—educating and building relationships with lawmakers, and paving the way for art therapy licensure and reimbursement parity.

- Art therapists in Virginia and Washington, DC successfully established art therapy licenses.
- Advocates in nine additional states moved art therapy licensure bills this year: Indiana, Iowa, Louisiana, Nebraska, Massachusetts, New Hampshire, Ohio, Pennsylvania, and Tennessee.
- Art therapists have also continued to engage in state “sunrise review” processes, which study the need to regulate a profession. The Nebraska Art Therapy Licensure Coalition completed a year-long sunrise review to determine the need to regulate art therapists, resulting in the Nebraska Department of Health and Human Services endorsing licensure. The Wisconsin Art Therapy Association testified in opposition to a bill that would establish a sunrise review process for every bill instituting a new occupational license.
AATA is proud to sponsor the Commission on Accreditation of Allied Health Education Programs (CAAHEP) accreditation process, managed by the Accreditation Council for Art Therapy Education (ACATE). This year, ACATE recommended accreditation of two art therapy educational programs to CAAHEP, bringing the total to 14. In 2021, ACATE expects to continue its work, anticipating eight site visits and expecting a total of over 20 accredited programs by the end of 2021!

Thanks to our 2020 conference committee’s incredible spirit of flexibility and dedication, AATA was able to transition from hosting a conference in Washington, DC to offering our first all-virtual conference over three days. We were honored that nearly 1,000 people attended, shared their experiences with our real-time chat feature and during on-camera networking opportunities—and created the connection and energy that we value dearly during our in-person conferences. All 57 hours of continuing education sessions are available on demand for registered attendees, something that wouldn’t have been possible in a traditional in-person conference.

So many of you shared your experiences and the art you made during the sessions on social media using the tag #AATA2020!

If you’ve been to an in-person annual conference, then you know how fun and inspiring it is to connect with art therapy colleagues, legends and students alike! While we couldn’t “meet” this year, we enjoyed hosting networking sessions at the end of each day of the virtual conference.

Thank you also to our conference sponsors and exhibitors who graciously maintained their support throughout 2020!
This year, we were excited to offer more professional development and networking opportunities than ever before! To date, we have 131 hours of online continuing education sessions available—and will be adding another 54 hours by the end of the year.

- In August, AATA President Margaret Carlock-Russo and Gary Smith, our DE&I consultant at IVY Group, conducted a webinar, “Leading with Intention to Promote Diversity, Equity & Inclusion” and discussed how we create sustainable, systemic change for our organization and profession.

- We also hosted two webinars to help art therapists manage during the Coronavirus pandemic: “Mental Health on the Front Lines of COVID-19” and “Tools for Art Therapists to Care for Clients and Self during COVID-19,” which can be accessed on our continuing education platform.

(These three webinars are CE-eligible and free for our members.)
CELEBRATING OUR MEMBERS

During AATA’s first virtual awards ceremony on November 4th, we honored this year’s distinguished recipients of awards in art therapy leadership, scholarship, research, clinical practice, and legislation. We thank our generous funders whose contributions make it possible for AATA to offer these prestigious awards each year.

**Deborah A. Good**
Honorary Life Membership
AATA’s highest recognition for lifetime achievement was given to Deborah A. Good, PhD, ATR-BC, ATCS, LPAT, LPCC. Dr. Good has worked 45 years as an Art Therapist and Clinical Counselor. She founded and served as Director of the Art Therapy Program at Southwestern College in Santa Fe, NM and served as President of AATA from 1997 to 1999. Dr. Good wrote and successfully advocated for the first Art Therapy licensure bill, which became law as part of New Mexico’s Therapy and Counseling Practice Act.

**Craig Alan Siegel**
Distinguished Clinician Award, General Services
“Over the past 11 years, Mr. Siegel has made significant strides and been a substantial impact on the ongoing significant reputation of the Miami-Dade Art Therapy in the Schools program,” wrote one colleague in nominating Craig Alan Siegel, ATR-BC.

**Ikuko Acosta and Marygrace Berberian**
Rawley Silver Research Award
Ikuko Acosta, PhD, ATR-BC, LCAT and Marygrace Berberian, LCAT, ATR-BC, LCSW were awarded for their joint proposal on a controlled, bio marker study of group art therapy for individuals with Parkinson’s Disease.

**Sara Miller**
Rawley Silver Research Award
Sara Miller ATCS, LCPC was awarded for her research proposal for an art-based program evaluation of artists with developmental disabilities.

**Michelle Napoli**
Best Paper Award
Michelle Napoli, DAT, ATR-BC, REAT, LMHC, was recognized for her article, “Ethical Contemporary Art Therapy: Honoring an American Indian Perspective.”

**Amanda Martin**
Pearlie Roberson Award
The AATA Multicultural Committee awarded Amanda Martin for her research proposal to map out access to art therapy services in Los Angeles County and identify barriers to access.

**Sojung Park**
Pearlie Roberson Award
The AATA Multicultural Committee also awarded Sojung Park, PhD, ATR-BC, LCAT for her research proposal of a qualitative pilot study on the experiences of international students in South Korea in an intercultural art therapy program.

**Jordan Potash**
Nancy Schoebel Distinguished Legislative Service Award
Jordan Potash, PhD, ATR-BC, LCAT, LCPAT was recognized for successfully spearheading Washington, DC’s campaign over several years. (DC’s license went into effect on Oct. 1.)
THANKS TO OUR SCHOLARSHIP SUPPORTERS

Thanks to the generous contributions from our donors, these important scholarships help support the next generation of art therapists who will transform the future of the profession. This year’s recipients are:

✦ Tsz Yan Wong, Prasad Family Foundation International Student Scholarship recipient
✦ Christine Zweifel, Student Scholarship recipient to attend the AATA Annual Conference
✦ Hillary Cantu, Student Scholarship recipient to attend the AATA Annual Conference
✦ Lyrah Wallace, Student Scholarship recipient attend to the AATA Annual Conference
✦ Jacqui Johnson, New Professional Scholarship Award recipient
✦ Hannah Trudo, New Professional Scholarship Award recipient
✦ Cui Jing, AATA 50th Anniversary Scholarship recipient
✦ Samantha Garrison Froh, recipient of the Rawley Silver Award for Excellence
✦ Salma Moustafa, Myra Levick Scholarship recipient
✦ McKeon Dempsey, Cay Drachnik Minorities Fund recipient
✦ Devorah Milecki, Ellen G. Horovitz Spiritual Art Therapy Scholarship recipient
✦ Sarah Fine, Irene Rosner David Medical Art Therapy Scholarship recipient
✦ Amanda Martin, Laura Greenstone Memorial Scholarship recipient
ADVOCATING FOR ART THERAPY LICENSURE

Thanks to the efforts of our advocates, art therapy licensure became law in Washington, DC and Virginia this year! In Nebraska, a year-long sunrise review culminated in the Nebraska Department of Health and Human Services endorsing licensure to the legislature and the governor.

Art therapy is now regulated through professional art therapy licenses in Connecticut, Delaware, the District of Columbia, Kentucky, Maryland, Mississippi, New Jersey, New Mexico, Oregon, and Virginia.

Five states regulate art therapy under related professional license: Texas, New York, Pennsylvania, Wisconsin, and Utah. Additionally, three states recognize art therapists for purposes of state hiring and/or title protection: Arizona, Louisiana, and New Hampshire.

AATA IMPACT

Achieving art therapy licensure is a core part of our mission to advance art therapy as a regulated mental health and human services profession. Licensure provides numerous protections and benefits for the public and for art therapists, including:

- Protecting the public from harm and from fraud by offering a means to easily identify practitioners with the academic training and clinical skills required for safe, effective, and ethical practice of art therapy.
• Offering a cost-effective approach to increase the number of licensed and credentialed practitioners to meet the public's growing need for mental health services—particularly during the Coronavirus pandemic—and offer greater diversity and innovation in mental health services available to consumers.

• Providing title and practice protection for art therapists, which would prohibit persons who do not hold Master’s degrees in art therapy from using the title “art therapist” or practicing “art therapy.”

Working with our chapters and our tireless volunteer advocates, we are excited to continue our art therapy legislative activities in 21 states next year!

• In 2021, we are expecting art therapy advocates in 16 states to run licensure campaigns: Florida, Iowa, Indiana, Kansas, Louisiana, Massachusetts, Minnesota, North Carolina, Nebraska, New Hampshire, Ohio, Pennsylvania, South Carolina, Tennessee, Washington, and Wisconsin.

• Advocates in five states plan to run campaigns for insurance reimbursement or title protection: Connecticut, Delaware, Michigan, New Mexico, and Oregon.

VIRGINIA’S ADVISORY BOARD ON ART THERAPY NOW IN EFFECT!
Thanks to art therapy advocates in Virginia, SB 713 passed this year and became law on March 11, 2020, establishing licensure for art therapists under the Board of Counseling! On August 28, Gov. Ralph Northam announced appointments to the Advisory Board on Art Therapy—the first step to implementing the art therapy license.

LICENSURE BECOMES LAW IN WASHINGTON, DC!
The District of Columbia’s art therapy licensure legislation passed congressional review, the final step of the legislative process, and became law on June 24, 2020.

Art therapists serve DC residents in psychiatric, medical, educational, and community settings, and this license is critical to expand access to art therapy services. Its clear definition and scope of practice will help consumers and employers alike find qualified art therapists.
RAISING PUBLIC AWARENESS ABOUT ART THERAPY

Another of AATA’s core responsibilities is to raise public awareness about art therapy—what it is, and what it isn’t. A large part of this work is through our public education channels, including our website and blog, and on social media. This year, we had a 24% increase in pageviews on our website compared to 2019! **Thanks to some amazing blog articles written by National Office staff as well AATA member volunteers, our pageviews on our blog increased by 636%!** (Please visit our blog at [arttherapy.org/blog](http://arttherapy.org/blog), and bookmark it!)

We are most proud of our **AATA Featured Member series**, which celebrates the work, talents, and diversity of our members, professionals and students alike. During the Coronavirus pandemic, we asked Featured Members to share their experiences about how their professional and personal lives have changed.

We are also regularly posting content on social media, including Facebook, Twitter, Instagram, and LinkedIn. We hope you’ll follow us there and share our content with your networks!

AATA’s leadership was also interviewed in national publications, including:

- The Today Show’s blog: *Art therapy isn’t just for kids: Here’s how it can help you*
- NPR: *Feeling Artsy? Here’s How Making Art Helps Your Brain*
- Fast Company: *Now is a great time to make some mediocre art*

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**AATA’s Reach**

- 72% of members say they follow us on social media
- 2,540 monthly pageviews of AATA’s Art Therapist Locator
- 1,774 students enrolled in Master’s level art therapy programs
- 6,809 subscribers to *Art Therapy Today* e-newsletter (including 92% of members)
- 81,795 monthly website pageviews to arttherapy.org
- 44 countries with AATA members
# Top 10 Most Read Blog Articles in 2020

<table>
<thead>
<tr>
<th>Rank</th>
<th>Title</th>
<th>Author</th>
<th>Link</th>
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<tbody>
<tr>
<td>2</td>
<td>Unpacking the So-Called Art Therapist Character in “Parasite”</td>
<td>By Clara Keane, AATA National Office Staff</td>
<td><a href="http://arttherapy.org/blog-unpacking-the-so-called-art-therapist-character-in-parasite/">arttherapy.org/blog-unpacking-the-so-called-art-therapist-character-in-parasite/</a></td>
</tr>
<tr>
<td>3</td>
<td>From an Online Art Therapy Grad Student, Here are 5 Tips for Making the Transition to Virtual</td>
<td>By Trica Zeyher, Art Therapy student at Edinboro University</td>
<td><a href="http://arttherapy.org/blog-5-tips-for-virtual-art-therapy-grad-students/">arttherapy.org/blog-5-tips-for-virtual-art-therapy-grad-students/</a></td>
</tr>
<tr>
<td>4</td>
<td>To My Colleagues that are Changing Everything, Here are 5 Tips for Effectively Teaching Art Therapy Online</td>
<td>By Carolyn Brown Treadon, PhD, ATR-BC, ATCS</td>
<td><a href="http://arttherapy.org/blog-5-tips-for-teaching-art-therapy-online/">arttherapy.org/blog-5-tips-for-teaching-art-therapy-online/</a></td>
</tr>
<tr>
<td>7</td>
<td>Drawing on Resilience – Reflections on How My Life has Prepared Me for this Pandemic (and Maybe Yours Has Too)</td>
<td>By Celeste Schexnaydre, BFA, MA, ATR-BC</td>
<td><a href="http://arttherapy.org/blog-drawing-on-resilience-how-my-life-has-prepared-me-for-this-pandemic/">arttherapy.org/blog-drawing-on-resilience-how-my-life-has-prepared-me-for-this-pandemic/</a></td>
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<td>Antiracist Approach to Art Therapy: Re-examining Core Concepts</td>
<td>By Jordan S. Potash, PhD, ATR-BC, LCAT , LCPAT</td>
<td><a href="http://arttherapy.org/blog-antiracist-approach-to-art-therapy/">arttherapy.org/blog-antiracist-approach-to-art-therapy/</a></td>
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DIVERSITY, EQUITY & INCLUSION

Diversity, equity and inclusion (DEI) are an integral part of AATA’s vision—that the services of licensed, culturally proficient art therapists are available to all individuals, families, and communities.

One of the core values of AATA is that we uphold social justice through inclusion, awareness, practice, and affirmation that all people deserve equal access to high-quality health care, including mental health care. As the clients we serve come from diverse backgrounds, advocating for health parity and its impact on their lives and well-being is essential.

AATA denounces any form of discrimination against any group of people regardless of race; ethnicity; religious or spiritual beliefs; national origin; ancestry; age; abilities; sexual orientation; gender; gender identity; gender expression; socioeconomic, marital, immigration, or military status; political views; and new cultural identities as they emerge.

AATA IMPACT

This year in particular, diversity, equity, and inclusion (DEI) intersected with racial justice. Our role was to facilitate conversation within the association, and provide leadership and education opportunities to drive home that DEI and social justice must be all our priorities. We hope you join us in this journey to ensure that AATA creates a welcoming, safe, diverse environment for all people from all walks of life—not just in this moment, but for the long haul.

- In January, the AATA’s Board DEI Task Force became a permanent Board Committee. Since then, the DEI Committee also completed assessments of a number of AATA policies, updated language to be used in AATA demographic surveys, and contributed to AATA’s content and resources to ensure diversity, equity, and inclusion in our materials and information for members and the public. The committee is also conducting listening sessions and a survey, and gathering experiences about diversity in the field and the membership, with assistance from our diversity consultants, the IVY Planning Group.

- While our discussions about virtual learning and connecting in different ways began due to pandemic restrictions, we are looking to expand such opportunities as another way to remove barriers to participation, increasing access and engagement for many more individuals. For example, in the past, we often waited for our annual conference to network and share ideas. AATA is not waiting for the annual conference to bring people together—we can bring a conference to people wherever they are, and not just for one week but throughout the year. We are also committed to expanding DEI capacity and learning at all levels, from national office and board to committees and membership.

- After July’s Virtual Member Meeting, members told us they wanted to learn more about AATA’s next steps in promoting DEI. In response, we hosted the webinar, “Leading with Intention to Promote Diversity, Equity & Inclusion,” an hour-long conversation with Gary Smith, co-founder of the IVY Planning Group, about how we create sustainable, systemic change for our organization and profession.

- The DEI Committee is collaborating with other AATA committees to support their work plans through a DEI lens. For example, in August, the DEI Committee and the Ethics
Committee collaborated to publish a *Race and Racial Trauma Best Practice* paper to serve as a resource in response to the murder of George Floyd and so many others.

- **We are in the process of conducting ongoing listening sessions** and an organizational survey to hear from our members (and non-members) about strategies to ensure that diversity is embedded into every part of our organization. We hope that AATA members and the art therapy community will participate wholeheartedly. This moment in our history also gives us an opportunity to be better allies, so please invite colleagues you work with, and students, interns or mentees, to join us in this important conversation.

- **Visit the inaugural DEI Gallery** presented by the DEI Committee as a catalyst to connect and bond through the sharing of these art expressions and as a way to begin envisioning a new past, present and future of art therapy.

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“Quarante Août” by Christine B. Haught, *AATA Featured Member 3/26/2020*

Artist statement: “As an artist, I spin together my ability to ‘look at the flowers’ with my passion for alchemy. Through my creations, I share my inner zest for beauty and transformation with others. I have studied geomancy, feng shui, and metaphysical interpretation, and I believe deeply in the divine power of feeling my way through the world.”
DEI MISSION STATEMENT

The AATA critically examines our structures, values, and actions to ensure the continuous integration of diversity, equity, and inclusion within the organization and the art therapy community.

DEI VISION STATEMENT

The AATA demonstrates equity and belonging in all aspects of the association and in the profession of art therapy.


“Untitled” by Yasmin Tucker, AATA Featured Member, 4/9/2020
Acrylic, magazine, yarn, paper and buttons on acrylic canvas. 2019. From the inaugural DEI Gallery.
STANDING UP FOR OUR VALUES

In recent years, we have learned how critical it is to articulate our values as a profession— and to respond when our values are attacked, publicly and quickly. Putting out a statement or call to action publicly on important issues not only let our members, the communities they serve, and our allies know where we stand, but also policymakers and elected officials.

2020 has reminded us that mental health is at the intersection of myriad other critical issues. We are proud to stand up for our values and in support of mental health.

RACIAL JUSTICE

As mental health professionals, art therapists see the dreadful effects of racism in our communities every day. The death of George Floyd, Breonna Taylor, and the many others who died by police brutality, not only shock our nation but devastate entire communities. These events expose the destructive effects of systemic racism, racial trauma, and oppression targeting communities of color. Experiences of racism—both direct and indirect—and even exposure to racism via the media can have devastating effects on the mental health of Black people and other BIPOC (Black, Indigenous and people of color) communities.

AATA IMPACT

As an organization, AATA encourages adopting principles of anti-racism and cultural humility—to develop more inclusive dialogues and collaborations, especially to address issues of social injustice in communities and through policy making.

“As a studying art therapist and student, my professional and research goals surround the topic of race, social justice, and racism. I am currently exploring the impact of art therapy on the effects of racial microaggressions on African-American college students at FSU. My goal is to use a social justice approach to art therapy as a form of treatment for historical and cultural trauma carried through generations within the African-American community. As a black student at a primarily white college, the recent race related events and the killings of George Floyd, Breonna Taylor, Elijah McCain, Ahmaud Arbury, Botham Jean, Philando Castile and many more drive and motivate me to be an advocate for my community and my clients of color.”

— Edith Juanah, art therapy master’s student at Florida State University
AATA Featured Member, 9/4/2020

“We are Born with Targets on our Backs” by Edith Juanah. Acrylic Paint. 2020.
SHIFTING THE RESPONSE TO MENTAL HEALTH CRISSES AWAY FROM LAW ENFORCEMENT

During mental health emergencies, people often have no alternative but to call law enforcement for help. Four in 100 adults in the United States are living with a severe mental illness, but generate one in ten calls for police service, according to a 2015 Treatment Advocacy Center report. However, an armed police officer responding to someone in a mental health crisis can escalate situations rapidly—and can end with deadly results.

AATA IMPACT

In March 2020, Daniel Prude, experiencing a psychotic episode, was killed by law enforcement officers after his brother called 911 seeking help. AATA issued a statement calling on lawmakers to decriminalize mental health and shift crisis responses from law enforcement to trained mental health professionals. Additionally, we urged government officials to stop demonizing people experiencing a mental health crisis or under the influence of substances and not blame them for their own deaths at the hands of law enforcement officers.

“Silent Protest” by Alberta (Alby) Gyimah-Boadi, MA, ATR-P, LGPC, AATA Featured Member, 8/13/20

Artist’s statement: “The evolution of how I processed the death of George Floyd and the rising racial tensions in America turned into my idea of a silent protest. Getting my voice heard the best way I know how: which is creating.”
CHILDREN DETAINED BY ICE

In 2018, AATA joined numerous mental health organizations in opposition to the Trump Administration’s Zero Tolerance Policy that separated children from their parents at the border.

AATA IMPACT

Even as the separation practice has been halted, steps need to be taken to re-unify all children with their families, ameliorate the trauma that has already been inflicted, and prevent future trauma. Consistent with our core values and in support of trauma-informed practices, AATA opposes any harmful practice or action that causes traumatic distress, psychological harm, or suffering as a result of inhumane conditions at detention centers.

Earlier this year, AATA sent a letter to U.S. Immigration and Customs Enforcement (ICE) and the Office of Refugee Resettlement (ORR) condemning the current practice of using notes from required therapy sessions against detained youth in court—a clear breach of patient confidentiality and abuse of power.

SUPPORTING INTERNATIONAL STUDENTS

In July, U.S. Immigration and Customs Enforcement (ICE) announced that international students would no longer qualify for F-1 student visas and would not be allowed to stay in the country if their college or university holds courses exclusively online this fall. The more than 1.09 million international students attending American colleges and universities would face deportation if they did not comply.

AATA IMPACT

For art therapy students, this rule was particularly harsh. Few academic institutions offer art therapy programs, so students would be challenged to find an alternative program if their school remained online in the fall. AATA, with members in the US and in 44 countries around the world, called on the Trump Administration and ICE to reverse this ruling. Later in July, the Administration decided to rescind their directive, allowing international students to stay in the country.

SHORTAGE OF MENTAL HEALTH PROFESSIONALS

Even prior to the Coronavirus pandemic, our country was facing a serious shortage of mental and behavioral health professionals. Approximately 119 million Americans currently live in a mental health professional shortage area, according to the Health Resources and Services Administration. This presents not just a distribution problem, but also a workforce shortage, according to the American Psychological Association.

AATA IMPACT

AATA supports policies that help attract a diverse, well-trained mental and behavioral health workforce to address this shortage. Licensing art therapists is one way to expand the mental health workforce in states where licensure is not available for art therapists. AATA also supports the Mental Health Professionals Workforce Shortage Loan Repayment Act (S. 2500/H.R. 2431).
Establishing loan repayment programs could help to incentivize qualified students to pursue careers in the mental health field and to practice in underserved communities, improving access to care.

TRAUMA-INFORMED CARE

Art therapy is uniquely suited to help survivors of trauma. Art therapists are trained in art-based interventions that stimulate the brain’s tactile-haptic, visual, sensory, and perceptual channels to allow integrated verbal and non-verbal processing of emotions.

Our country has recently experienced a number of devastating natural disasters, from record-breaking hurricanes in the Gulf Coast to wildfires ravaging the West Coast. These aren’t discrete events, but the start of ongoing traumatic stresses now compounded by a pandemic.

AATA IMPACT

AATA urges all institutions—from schools to community organizations to government agencies—to develop trauma-informed care systems to foster healing for individuals and communities.

- AATA works with the Substance Abuse and Mental Health Services Administration (SAMHSA) to showcase art therapy as a trauma-informed discipline and illustrate the healing potential of art therapy for children and adolescents who have experienced trauma. Eighteen states, through their governors’ spouses offices, as well as the National Congress of American Indians, are promoting trauma-informed care.
- In addition, we are encouraging lawmakers to support SAMHSA’s efforts at the federal level and trauma-informed care in their state.

MENTAL HEALTH PARITY

Access to mental health services is vital to reducing the incidence and severity of behavioral health disorders, especially during a pandemic. Mental health parity simply describes the equal treatment of mental health conditions and substance use disorders in insurance plans as compared with physical health treatment.

AATA IMPACT

AATA advocates for parity in the private insurance market and Medicaid programs to keep behavioral health treatment at the same priority level as other medical care.

Discrimination in coverage still exists despite federal law, including the Mental Health Parity Act (MHPA) of 1996, which prohibits large group health plans from imposing higher annual or lifetime dollar limits on mental health benefits than medical or surgical benefits, and the Affordable Care Act (ACA), which requires plans sold to individuals and small employers to include coverage of mental health and substance use disorder (SUD) services.

AATA supports the Behavioral Health Coverage Transparency Act (H.R. 2874/S. 1576), which would increase oversight and enforcement of the federal parity law requiring insurance coverage of mental health and SUD services be equal to the coverage of medical and surgical health services.
**SUPPORTING LGBTQIA COMMUNITIES**

Art therapists provide mental health care and family support for the LGBTQ community in addressing sexual orientation, gender identity, the coming out process, depression and suicidality, and related psychosocial issues. AATA affirms LGBTQIA orientations are natural, positive, and moral variations of human sexual expression, and as an association, our members affirm and embrace the LGBTQIA community.

In November, the 11th Circuit Court of Appeals overturned two local Florida ordinances that ended the practice of conversion “therapy” and protected minors from harmful efforts to change their sexual orientation.

**AATA IMPACT**

AATA unequivocally opposes SOCE (sexual orientation change efforts) as unethical. In response to this court ruling, we updated and recirculated our statement opposing SOCE. As asserted in our Values Statement, AATA embraces and affirms individuals within the LGBTQIA spectrums of sexual orientation and gender-expansive and transgender individuals.

AATA supports therapeutic interventions that foster healthy development across the lifespan of LGBTQIA individuals, and equally admonishes treatment purported to cure or curb natural variations of sexual orientation, gender identity, or gender expression.

“Art therapy is better for many communities, the LGBTQIA+ community being one of them. LGBTQIA+ people are much more likely than their heterosexual counterparts to attempt and complete suicide. Trans women of color are murdered without media coverage or proper investigations.

Grief often plagues this community which is why it is so important to celebrate wins and find joy. Suicidal ideations and history can be hard for people to discuss and there are rarely words to accurately describe grief. Art therapy is great for this because it gives clients an outlet to express these feelings without fear of the possibility of a judgmental face, awkward silence, or stare after revealing this personal information.

Creating art takes the focus off having the perfect things to say and puts it on the creative process. Art therapy can give people the freedom to explore their sexuality without feeling the need to commit to labels by using their imagination to make art. With the help of a qualified and competent art therapist, they may discover unconscious sexual desires from what they create which could be a pivotal moment in their life.”

— Gabrielle Cooper, Counseling and Art Therapy graduate student at Ursuline College
FUNDING FOR THE ARTS

The Coronavirus pandemic has been particularly devastating for the arts and culture sectors: an estimated 2.7 million jobs and more than $150 billion in sales of goods and services have been lost for creative industries nationwide, according to Brookings.

- The federal stimulus package in March 2020 offered only $300 million for arts funding, including $75 million for the NEA. The American Association of Museums (AAM) and the American Association of Museum Directors (AAMD) sent a letter to Congress asking that $4 billion be included in the package to support nonprofit museums alone for March through June.

AATA IMPACT

AATA works in coalition with other arts advocacy groups to support federal funding for the National Endowment for the Arts (NEA), which helps promote creativity and public access to the arts in communities across the country.

- The NEA, in collaboration with the Department of Defense and the Department of Veterans Affairs, also supports the military and their families. Their Creative Forces: NEA Military Healing Arts Network program offers creative arts therapies, including art therapy services, at 11 clinical sites across the country to address the unique needs of military patients and veterans diagnosed with traumatic brain injury and psychological health conditions like PTSD.

AATA also partnered with Americans for the Arts in their annual Arts Action Summit, which was a digital event this year.


Artist’s statement: “The weaving represents the development of my artist and therapist identity by using natural materials from two locations which influenced my growth. My artistic interest started to emerge while attending high school in Pennsylvania, where I was able to create a collection of paintings inspired by human animalistic behaviors. I used my paintings as a self-meditative technique in overcoming my own internal struggles.”
We are so excited to make our first Annual Impact Report available to you, highlighting this year for the American Art Therapy Association as we continue our work as the leading voice for art therapists and promote mental health for everyone.

The Board of Directors has shown tremendous leadership, which has enabled the national office and AATA volunteers to deliver on the promise of our mission and member value even during this unimaginably challenging year.

I am proud to be working with the members of our Board—each bring a distinct voice and perspective to a collaborative process that is guiding the AATA to a bold future. A future in which the profession and the AATA grow through the expected and unpredictable disruption that is likely ahead as the “turbulent twenties” unfold. Their guidance on advocacy, public awareness, member engagement and in particular their vision around diversity, equity and inclusion will be critical to developing the future of the organization and the profession.

As you saw in this impact report, the national office team has worked hard along with AATA’s many volunteers to deliver tangible outcomes to meet the board’s strategic vision. In advancing the profession and organization, we have made progress in key areas such as state licensure, public awareness, DEI, accreditation of education programs, and research. We have also made strides in advocating for art therapy and our clients, and in broader terms for the arts and mental health.

For our members, we have made a focused effort to offer you a vibrant, individualized member experience. Our newly updated MyAATA platform with single sign-on (so only one password to remember) brings so many resources to our members with just one click!

Whether it’s helping support your local advocacy efforts or attain continuing education credits, register for an event, or access COVID-19 related resources and best practices, or, joining in the conversation in our robust member-to-member forum, I hope you are taking advantage of the MyAATA community to support you in your unique and individual career journeys.

To all of you who have participated in all-member and chapter virtual meetings, and taken time to respond to various feedback and survey requests, we thank you for sharing your experiences, your voice and your energy with us.

Finally, I want to say that the National Office is here for you! The Coronavirus has not stopped the staff’s dedication and passion for service and support of our members. We’re available by phone (703-548-5860) or email (info@arttherapy.org), and eager to hear from each and every one of you.

Sincerely,

Cynthia Young Woodruff, CAE
THANKS TO OUR 2020 COMMITTEE VOLUNTEERS

Thank you to our volunteer committee chairs and members for all the work they do all year to support our association and community!

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<td>Conference Committee Chair: Susan Boxer-Kappel</td>
<td>ACATE (Accreditation Council for Art Therapy Education) Chair: Janet Kempf</td>
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<td>Local Arrangements Sub-Committee Chair: Tyler Strusowski</td>
<td>Coordinator: Dana Elmendorf</td>
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<td>Education Committee Chair: Renee van der Vennet</td>
<td>Assembly of Chapters Speaker: Liz Hlavek</td>
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<td>Continuing Education Sub-Committee Chair: Marie Wilson</td>
<td>EPAB (Educational Programs Approval Board) Chair: Mercedes Ballbé ter Maat</td>
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<td>Undergraduate Education Sub-Committee Co-Chairs: Jennifer Schwartz and Michelle Pate</td>
<td>Past Presidents Advisory Council Chair: Chris Strang</td>
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<td>Doctoral Education Sub-Committee Chair: Nancy Gerber</td>
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<td>Ethics Committee Chair: Lisa Hinz</td>
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<td>Membership Engagement &amp; Development Committee Chair: Mary Ellen Ruff</td>
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<td>Chapter Support Sub-Committee Chair: Liz Hlavek, Assembly of Chapters Speaker</td>
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<td>Multicultural Committee Chair: Craig Siegel</td>
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<td>Research Committee Chair: Jill McNutt</td>
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<td>Nominating Committee Chair: Gioia Chilton</td>
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<td>Honors &amp; Scholarships Chair: Andrea Davis and Denise Wolf</td>
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<td>Minutes (2020 Annual Meeting) Chair: Raquel Farrell-Kirk, Secretary</td>
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<td>Tellers Committee Chair: Gwendolyn Short</td>
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<td>Resolutions Chair: David Gussak</td>
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<td>Review Coordinator: Lynn Kapitan</td>
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OUR NATIONAL OFFICE STAFF

The staff is available by phone (703-548-5860) or email (info@arttherapy.org) anytime!

Cynthia Young
Woodruff
Executive Director

Shazza Berhan
Operations Assistant

Eugenia Bravo
Coordinator,
Member Services

Barbara Florence
Director, Events &
Education

Clara Keane
Manager, Advocacy &
Public Affairs

Kat Michel
Senior Manager,
Member Services

McKeon K. Dempsey
Intern

Claire Kalala
Intern

Zachary D. Van Den
Berg
Intern

OUR BOARD OF DIRECTORS

Our volunteer board is elected by the members of the organization.

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Ori Cruz, MPS, LCAT

Louvenia Jackson, MFT,
ATR-BC, PhD

Gretchen M. Miller, MA,
ATR-BC, ACTP

Rochele A. Royster, PhD,
ATR
Artist contributors: Elizabeth Cabell, Daniela Cappy, Sarah Collins, Rhonda Daniels, Shayla Hayward-Lundy, Arielle Jessop, Jamar Johnson, Susan Berkowitz-Schwartz, Cassandra Olszewski, Lilla Ohrstrom, Ariel Papas, Jana Rivers-Norton, Katherine Smith, Jonathan Soard, Heather Stemas, and Lisa Wasserman. (See the full quilt.)

Thanks to AATA’s Multicultural Committee, the Healing Quilt Project invited art therapy professionals, students, and others to contribute artwork in the spirit of coming together and healing in response to the life-altering individual and community experiences of 2020.