STATEMENT OF

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On behalf of the
Wisconsin Art Therapy Association

On
Assembly Bill 605, Relating to Reports on Bills Requiring Occupational Licenses

Before the
Committee on Regulatory Licensing Reform
Wisconsin State Assembly
January 8, 2020

Chairman Horlacher, Vice-Chairman Ballweg, and Members of the Committee:

My name is Christopher Belkofer and I am the Director of the Graduate Art Therapy Department at Mount Mary University (MMU) in Milwaukee, Wisconsin. I also serve as Government Affairs Representative for the Wisconsin Art Therapy Association, on whose behalf I am appearing before the Committee today to express the Association’s concerns with AB 605, which would create a reporting process for legislative bills requiring occupational licenses.

I would like to begin my testimony today in a somewhat unorthodox manner, by starting with a story. John (a pseudonym) is a thirteen year old boy who has a history of outbursts in the school and in the community. John likes to draw but is shy and has very few friends. One day in school he makes a drawing. In the left corner of the drawing John depicts a tombstone. In the center of the drawing is a picture of John’s school Mascot, the Wildcats. To the right of the mascot is a drawing of a machine gun encircled by children in pools of blood. As you hold this image in your mind, I ask you to consider the following question: Is John a danger to himself or others? Is this drawing “just a drawing” or is there something else going on?

According to a 2019 report by Mental Health America, only 10 states have a greater prevalence of mental illness than Wisconsin. We also rank low in terms of mental health workforce availability, placed 36th out of the 50 states with one mental health worker for every 560 persons. Wisconsin is not alone in facing the mental health challenges of today, which are nationwide, but Wisconsin can be pioneering in our work to address them. We need licensing reform but we must also provide quality services to our most vulnerable citizens and refrain from economically disadvantaging mental health professionals. We are facing a public health crisis in the areas of mental health and substance abuse. I am here today because I am concerned that parts of this bill may
threaten our State’s ability to respond effectively. My rationale for these concerns is related to the following:

1. Requirement for Documented Harm to the Public Health and Safety

   Section 1(3)(a) of the bill requires the Department of Safety and Professional Services to evaluate whether the unregulated practice of a profession, occupation or business can “clearly harm or endanger the health, safety, or welfare of the public,” and also whether the potential for harm “is recognizable and not remote or speculative.”

   We are concerned that the rigidity of this language, as well as the lack of clear definitions regarding “recognizable” or “speculative” evidence of harm might create an unrealistic and inaccurate standard for determining need for licensure and regulation of art therapists and other health and mental health professions. If strictly implemented, this standard would tend to provide higher levels of regulation to occupations that have documented records of untrained or incompetent practice and of abusing public health and safety, while denying comparable regulation to professional groups with high levels of specialized training, strict training and credentialing standards, and strong professional ethics requirements.

   The profession of art therapy, for example, has had few documented disciplinary or enforcement actions nationally, either in states that have specific art therapist licenses, or in states, like Wisconsin, with registration programs to practice psychotherapy. This can be attributed in part to the nature of the profession, which requires master's level professional education and extensive supervised work experience to qualify for entry-level practice, and a professional credentialing process that requires credential holders to maintain professional competency and adhere to strong ethical and practice standards.

   Also, the lack of specific art therapist licenses in most states have required that art therapists obtain licenses to practice under related mental health licenses. This has had the consequence of: (i) making art therapists indistinguishable to consumers and state regulators from others holding the same license, and (ii) failing to provide specific standards for competent and ethical practice of art therapy that regulators are able to enforce and provide consumers with a reasonable expectation that persons claiming to provide art therapy services will have the training and competence to provide them.

2. Additional Criteria for Evaluating Need for Regulation

   We would suggest that an additional, and equally important, standard for assessing the potential for public harm for many health-related professions involves the need to protect potential clients from misrepresentation, fraud, and potentially harmful actions by persons claiming to offer professional services, such as art therapy, but who lack any professional training or have inadequate specialized training or credentials to engaged in practice.
Art therapy, for example, recognizes the power of art and art-making to stimulate memories and reveal emotions. Understanding how art interacts with a client’s psychological disposition, and how to safely manage and interpret the reactions different art processes may evoke, are competencies that must be gained through substantial experiential learning that is unique to art therapy master’s degree training.

Individuals using art therapy methods and art materials in their mental health practice without appropriate or adequate clinical training pose significant risk to the emotional stability of their clients. Potential risks include misinterpreting or ignoring assessments the practitioner has not been clinically trained to diagnose or treat, or eliciting adverse responses from clients that they are not properly trained to interpret or treat. The potential for harm is magnified where a client has a vulnerable psychological predisposition. In the case of John in the story at the beginning of my testimony, it is very likely that a school counselor or even a psychologist or professional counselor without art therapy training would have either inferred the wrong conclusions from the student’s drawing or missed serious warning signs. Don’t John and his family deserve professional help with specific training to understand and interpret the complexities of his non-verbal expression and behavior?

Increased awareness of how the process of art-making can influence neural pathways and lead to improved physical and mental health has encouraged other mental health practitioners to include art materials and art therapy methods within their practice and to misrepresent their services as art therapy. That this is occurring in Wisconsin can be readily illustrated by a review of the Psychology Today online listings of mental health professionals offering art therapy as a “treatment option” in the state. Of more than 140 listed professionals, only 21 identify themselves as having professional art therapist training and credentials, with most of the remaining being unknown to members of our Association.

A 2019 report by the Virginia Commission on Health Professions which examined the need to regulate art therapists included as major findings that “Art therapy practices pose an inherent risk of harm to the patient,” and also that “Individuals practicing art therapy without the proper skills, level education, supervision and ethical standards pose a risk, especially to vulnerable patients who may have difficulty with verbal communication.”

3. Addressing Wisconsin’s Critical Need for Mental Health Practitioners

In addition to my program at Mount Mary University, the University of Wisconsin – Superior offers a graduate program in art therapy. There are also five Wisconsin colleges and universities offering undergraduate art therapy programs. Graduates of the MMU program are employed in hospitals, geriatric centers, schools, hospice care, prisons, community health organizations, and private and community mental health practices across Wisconsin. Most have been able to practice in these settings as Licensed Professional Counselors. However, this option is unlikely to be
available for future graduates as the counseling profession in Wisconsin, as in states across the nation, has taken steps to restrict eligibility for counseling licenses to persons holding degrees from specific accredited or equivalent counseling programs. In the absence of a specific art therapist license, art therapy graduates will be forced to move to other states that provide opportunities for licensure and cause Wisconsin to lose the next generation of qualified art therapist practitioners to help address the growing mental health crisis in our state.

We are concerned that the narrowly defined standard for assessing the need for regulation of professions and occupations in AB 605 will impose unreasonable and prohibitive barriers that may prevent art therapists, as well as other health-related professions, from obtaining appropriate regulation by the state. Without a qualifying mental health license for art therapists, there will be fewer licensed professionals to meet our state’s current shortage of licensed professionals and less accessibility and diversity in mental health services available to Wisconsin consumers.

Providing art therapists with a qualifying mental health license can help address our state’s shortage of mental health practitioners, as graduates of art therapy programs will be encouraged to remain or return to the state to establish practices, qualified art therapist in neighboring states without licenses will relocate to Wisconsin, and greater numbers of undergraduate students will be encouraged to obtain graduate training to practice in the state.

Thank you, Mr. Chairman and Members of the Committee for this opportunity to appear today to express our concerns with AB 605. Your commitment to the health, safety, and wellbeing of this state is greatly appreciated. While we do not oppose the proposal to create a regulatory review process for occupational licenses, and have found similar processes helpful in other states, we respectfully request that the Committee consider expanding the criteria for determining harm to the public to include issues relating to public confusion about who is qualified to practice specific professions and the potential for misrepresentation and fraud by practitioners lacking appropriate training and credentials to offer highly specialized services to the public.

I am confident in the quality of services that art therapists provide, and I welcome this opportunity to share the important work of art therapists in the state of Wisconsin. I am available today or in the future to answer any questions you may have.

Sincerely

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