

# Oregon Art Therapy Licensure Bill Signed into Law

AATA

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Oregon [House Bill 2434](#), which provides art therapy licensing and title protection for credentialed professionals, was signed into law by Governor Kate Brown on May 25, 2017. The bill passed the Senate on May 15, twenty-three to seven, and the House on May 17, forty-seven to twelve. For more details on the history of the bill, visit the [Oregon State Legislature](#) website or [LegiScan](#). This accomplishment for the profession was achieved thanks to the dedicated work of AATA members in Oregon who worked closely with the AATA national team and advocates in other states. Mary Andrus, DAT, ATR-BC, LPC took on a leadership role in Oregon's licensure efforts and shares her experience throughout the process in the following interview.



*From left (front): Mary Andrus DAT, ATR-BC, LPC; Sally Giles ATR-BC, LPC; Beth Ann Short, MA, ATR-BC; and (back) Gaelan Harmon-Walker MA in front of the Oregon State Capitol building.*

Dr. Andrus is a first-time policy advocate, and learned how to navigate the process while jumping in head first. Although her involvement in the Oregon licensure efforts started recently, art therapists in the state have been organizing for over two decades and have learned a great deal about how their local government operates. In a [support letter of the current bill](#) Christine Turner, LPC, NCC, ATR-BC, ACS, who was involved in licensure efforts in 1996 with a bill sponsored by Representative Ron Adams, recalls learning that “establishing a new Board for a small number of practitioners is politically difficult and unreasonably costly for the State.” For this reason, the current bill directs the already-established Health Licensing Office to issue a license to credentialed art therapists.

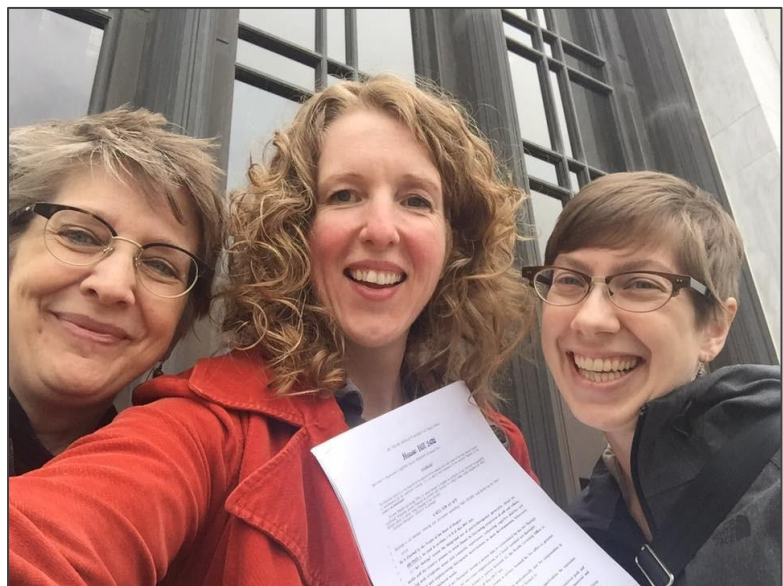
Dr. Andrus recently moved from Chicago to accept the position of associate faculty and within a year was promoted to the position of art therapy counseling program director at Marylhurst

University. She served as a Past-President of the Illinois Art Therapy Association and lost no time becoming an active advocate in the Oregon landscape. Because Oregon did not have an official AATA chapter, advocates worked with the AATA staff through the [Oregon Art Therapy Licensure Task Force](#). The Task Force began the process towards licensure by holding group meetings, administering a poll, and gathering testimonials on the profession. The monthly task force meetings were well attended (10-15 regular attendees), and members began scheduling meetings with their legislators; they made calls, met for coffee, and visited their offices. When it came time to draft the bill, Dr. Andrus, Kris Bella ATR-BC, and Sally Giles ATR-BC, LPC, gathered around Sally's kitchen table and combed through transcripts from a recent Oregon music therapy licensure bill that had passed the year prior and other states' art therapy licensure and title protection bills, piecing together language to use in their own bill.

Dr. Andrus felt supported by the AATA national staff throughout the process. She notes, "Dean Sagar, AATA's public policy director was tremendously helpful throughout this process. I often was going back to him to help clarify the rules, the language and for support. Since he has helped write so many bills across the US, he has a firm grasp on the language, how the laws are interpreted, and where they may be unclear. Without his clarifications and support we would not have been able to make it through this process."

Lillieth Grand MS, MT-BC, a colleague of Dr. Andrus's at Marylhurst who had been involved with the music therapy bill, connected the art therapists with Republican Representative Julie Parrish, who had sponsored and passed the music therapy licensure bill. She offered to sponsor the art therapy bill and proved to be an effective guide through the Oregon legislative process. Senator Michael Dembrow [D] and Representative Jeff Reardon [D] also signed on as sponsors.

Dr. Andrus recalls that during the first hearing on February 13, when art therapists including herself, Gaelan Harmon-Walker, and Sally Giles (pictured on page 1) testified on the efficacy of art therapy, one art therapist's testimony was particularly powerful. Frances Griffith, MS, ATR-BC brought examples of artwork, which she used to illustrate her descriptions of client populations that especially benefit from art therapy.



*From left: Laura Beer, PhD, MT-BC Oregon Licensed; Mary Andrus DAT, ATR-BC, LPC; and Sally Giles ATR-BC, LPC.*

There were several challenges in passing the bill, both within the art therapy community, and in the wider counseling professions community. Within the Oregon art therapy community, there was some disagreement as to how to create a bill that would best support the needs of the community. Specifically, there was discourse on whether the license

should be mandatory. Some people advocated for it to be optional, so as to allow maximum flexibility; however, the Legal Counsel in Salem clarified that the bill would have to be mandatory.

Dr. Andrus explains that the mandatory nature of the bill will “impact those who have their LPC (Licensed Professional Counselor) and not their ATR (Registered Art Therapist). It will require anyone who wants to practice and call what they do art therapy to have their ATR and adhere to the ethical guidelines and continuing education requirements of the ATCB.” She continues, “Our license is well positioned to provide a direct path to licensure for art therapy graduates. In order to get the LAT (Licensed Art Therapist), individuals will need to attain the ATR credential and for the LCAT (Licensed Certified Art Therapist) they would need to attain the ATR-BC.”

Another challenge for the bill that caused tensions both within the art therapy community and the larger counseling professionals community, was in the language regarding title protection. Lobbyists for psychologists and social workers wanted to protect the employment of individuals without art therapy credentials at state hospitals. The language agreed upon did not prohibit professionals who were not art therapists from using “art in a manner incidental to the person’s practice.” However, the original version of the House Bill, written by the Legal Counsel, worded the above section as “*art therapy* in a manner incidental...” This caused confusion in the art therapy community, as the incidental use of art therapy would not be possible, considering that art therapy is a professional service that requires education and professional experience. Art therapists testified to express their discontent with the language regarding title protection (see a [testimony](#) by Jamie Waters MA, ATR-BC, LPC, NCC on February 28). The language was revised in the Senate to read "the incidental use of art" (removing "therapy"). The task force experienced some internal polarization due to the spread of mixed messages and inaccurate information about the bill, as well as confusion about how a bill moves into law.

In early March, the AATA National Office coordinated a meeting with the Oregon art therapy community and Margaret Carlock-Russo, Ed.D, LCAT (NY), ATR-BC President of the Arizona Art Therapy Association and Speaker of the Assembly of Chapters, who had recently succeeded with her own chapter through the passage of a [state contracting and title protection bill in Arizona](#). After this meeting, which had more than 35 Oregon art therapists in attendance, Dr. Andrus reported the group felt more unified and found a silver lining in the conflict. She noticed that one result of established art therapists arguing over the terms of the bill and how they related to the future of the profession, sparked a stronger interest in the students within the group to take on more active roles. They began to take charge of an effort that would be crucial for their careers and many wrote their own testimony in support of the bill. Once the language was amended and revised, the tensions within the group began to ease.

Dr. Andrus places the timely licensure achievement in Oregon into its national context: “In Oregon and in many states, the LPC is losing momentum and phasing out. Many states are changing the requirements and this will impact future art therapists who plan to get the LPC in lieu of the ATR.”

Dr. Andrus is very pleased with this accomplishment but is already preparing for the next steps in Oregon. She shares her thoughts:

Our next steps are to clarify the rules in working with the Oregon Health Licensing Office to clearly articulate what the law means and how it is interpreted. For example, it states: “Section 5 (c) A person licensed under the laws of this state in a profession or occupation other than art therapy who uses art in a manner incidental to the person’s practice.” Yet, in a [recent article](#), author Chris Grey interpreted this as “The bill was amended to allow other licensed health professionals to maintain art therapy among their menu of services.” His interpretation is not exactly what was intended when developing this amended language.

In the rules we will clarify that persons who only use art in a manner incidental to their practice are exempted from the requirement to obtain licensure as art therapists. If this becomes problematic then we will have to further amend the bill to reflect different language next year.

Our future plans are to work toward insurance reimbursement for those who attain the LCAT, following in the steps of Maryland we hope to provide quality work by credentialed art therapists to those in need.

Check the website of the [Oregon Art Therapy Licensure Task Force](#) to follow their next steps.

The AATA National Office continues to actively support advocacy efforts throughout the country, bringing unique and valuable expertise to state activity towards title protection, state employment, licensure, and reimbursement. We are working with members in 28 states on organizing their advocacy efforts including eight states with bills introduced during the 2017 legislative period. To learn more about recent policy achievements, read one article on the passage of a [state contracting and title protection bill in Arizona](#) and another on the passage of an [insurance reimbursement bill in Maryland](#).



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