

ATCB

Official Newsletter
of the Art Therapy
Credentials Board

REVIEW

Winter 2000

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Why Should You Be a Member of AATA and Be Registered and Certified by ATCB?

Janet Eskridge, ATCB President, and Marcia L. Rosal, AATA President

Membership, registration, board certification, recertification, AATA, ATCB? Confused? Unclear about the benefits of AATA and ATCB? Unsure why both membership and credentialing are important?

This article focuses on clarifying the roles of the American Art Therapy Association (AATA) and the Art Therapy Credentials Board (ATCB). Both are crucial to the growth and development of our profession. Each entity serves important yet different purposes. We can all be more effective advocates and spokespersons for art therapy if we have an awareness of the functions and benefits of AATA and ATCB, on both an individual level and globally.

What AATA Has to Offer

AATA is an organization dedicated to the advancement of the profession of art therapy. We urge all art therapists to become members of the association and to lend their support and expertise to helping us with this mission.

Every day AATA works towards serving its membership. Here are some of the ways AATA benefits its membership.

We offer a wide array of published materials for professional use and continued education. Our quarterly journal, *Art Therapy*, publishes current papers in the field. Recently, the journal has been indexed in several databases

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THE 1999-2000 ATCB BOARD OF DIRECTORS. The board was sad to lose member Nancy Mayer Knapp. There is a tribute to this longtime ATCB supporter on page 5.

Why Should You Be a Member of AATA and Be Registered and Certified by ATCB?

FROM PAGE 1

including ERIC, PsychLIT, and CINAHL. We also publish a quarterly newsletter that informs members about current issues as well as projects of AATA committees and chapters.

We also offer a number of informational brochures for members and allied professionals. Here is a short list of the brochures we offer: *Information and Membership*, *Art Therapy: The Profession* (in both English and Spanish), *Ethics Document*, *Bylaws*, *Education Standards*, *Art Therapy Research Initiative*, *Art Therapy Educational Program List*, and *Art Therapy Resources Guide*.

In 1999 AATA published the first in a series of monographs on clinical issues. *The Twelve Steps and Art Therapy* by Kell Julliard marks the debut of a long line of short monographs to assist art therapists in their clinical work. AATA is also planning a second series of monographs on research issues.

AATA offers a number of programs for the continuing education of its members. Our premier educational event is the annual national conference, which features distinguished speakers from both inside and outside of the profession. In conjunction with annual conferences, AATA publishes the conference proceedings as a means of referencing the cutting edge information presented during the conference. Upcoming conferences will be in St. Louis (November 8–12, 2000) and Albuquerque (November 7–11, 2001). Additionally, regional symposia are offered on a wide variety of topics such as "Art Therapy in the Schools," "Addictions," and "Art and Medicine." The symposium offered in spring 2000 is "Art Therapy with the Older Adult" and will be facilitated by Judith Wald and Bernadette Callanan. AATA members can receive continuing education cred-

its by attending these events. AATA is an approved provider of continuing education credits by the National Board for Certified Counselors (NBCC).

To ensure that future art therapists receive a quality education, AATA reviews and approves master's level educational programs. The Educational Program Approval Board offers the status of "Approved" to only those programs that meet the Education Standards set by the AATA Board. In the 1999–2000 *Art Therapy Educational Program List*, there are 29 approved art therapy programs listed.

The viability of affiliate chapters is important to a sound and healthy national professional organization. AATA assists chapter development through the use of legal services and through assistance from the AATA treasurer. Once a chapter is up and running, AATA offers legislative support for all efforts leading to state regulatory recognition of art therapists. AATA holds an annual meeting for affiliate chapters. The meeting serves as a forum to discuss state issues and form strategies to solve pertinent problems. The speaker of the affiliate chapters sits on the AATA Board and brings the concerns of the chapters to the board's attention.

AATA is deeply involved in governmental affairs and public policy. Our public policy expert advises AATA on federal legislative issues and helps AATA develop positions on federal issues that may impact the practice of art therapy. AATA offers legislative advocacy workshops for its members. The first annual *Hill Days* event was held in June 1999 to educate AATA members about how to impact legislative and public policy. This event is open to all AATA members and will be held this year on June 12–13 in Washington DC. For chapter members and others who want to hone their governmental affairs

skills, an advocacy workshop is held annually at the national conference.

Planning for the future is of utmost importance. Studying issues that may affect the practice of art therapy is another member benefit. Currently, AATA has three task forces at work to help us strategize. The Accreditation Task Force researches current trends of accreditation and studies the value and feasibility of moving from an approval model to an accreditation model for reviewing educational programs. The Research Task Force is examining the development of a research foundation, which would provide grant monies to art therapists to study various aspects of art therapy practice. Crisis Response, our newest task force, is working on a plan for training art therapists to respond to community crises as part of a team.

AATA is dedicated to working with other coalitions and sister organizations. Meeting with coalitions helps AATA to research issues that may be pertinent to us and to our allied health professionals. Coalitions also give AATA a stronger voice in affecting public policy. Here are a few of the groups with which AATA works:

■ **NCATA:** This coalition of six creative arts therapies associations (art therapy, dance therapy, drama therapy, music therapy, poetry therapy, and psychodrama) is a forum to address federal legislative trends concerning our professions.

■ **FACT:** The Fair Access Coalition on Testing is an umbrella group of mental health professions that challenges psychology associations on a state-by-state basis to ensure the rights of other mental health professionals to use psychological tests and assessments in our practice.

■ **HPN:** The Health Professional Network is a network of allied health professional associations working together to understand how to have a voice in the arena of healthcare; to impact man-

aged care, Medicaid, and Medicare, and to receive third-party payments for allied health services.

AATA evaluates its member benefits on a continual basis. This year we are going to conduct a membership needs assessment. The needs survey will be sent out through AATA's affiliate chapters. Through membership with AATA and your local chapter, you will be able to give your input about what services most benefit you and to offer ideas on additional benefits.

Finally, almost every day in some part of the country an art therapist is educating the public or other mental health and healthcare professionals about the practice of art therapy. We have a healthy and strong public relations component to our association, and we want to make this public relationship network stronger. With each and every art therapist across the nation becoming a member of AATA, we can make this happen. If you have chosen to drop your membership with AATA, we urge you to reconsider your choice. We need your support to improve the quality of the careers of art therapists. We cannot do this without you. Every year, AATA improves its services to members. Perhaps you have an idea of how AATA can better serve its members and the profession. We need to hear from you about these ideas. Won't you consider joining and making your voice heard?

ATCB Promotes Art Therapy Standards

ATCB is an organization whose purpose and goal is to protect and benefit the public through maintaining and developing standards of practice in the field of art therapy. ATCB's mission is to promote, develop, and encourage the art, science, and practice of art therapy through standardized procedures for registration, certification, and recertification.

The ATCB Board is comprised of

seven credentialed art therapists and one public member. In addition, non-voting chairs of three committees attend and participate in board meetings. The Registration Standards Committee handles all issues related to the registration of art therapists. The Certification Committee focuses its attention on the certification examination. We work with an expert in the field of test development and analysis. The Recertification Committee handles all concerns related to the recertification of board certified art therapists.

Because our focus is specifically on credentialing, ATCB does not use the term "members." We refer to creden-

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Each of us has the opportunity to participate together to educate the public regarding both the field of art therapy and the importance of credentialing.

tialed art therapists as "registrants and certificants." Currently, there are 2,474 registered art therapists and 1,201 art therapists who have met the criteria for both registration and board certification. We maintain a database, which provides important demographic information regarding registrants and certificants. When members of the public are seeking the services of an art therapist in their area, ATCB is available to provide information regarding a professional's credentials. By request, we are in the process of producing a directory of art therapists on our Web site and will be compiling a printed directory in the future.

As a membership organization, AATA offers two categories for professional art therapists. *Professional Members* are individuals who have completed graduate level educational training in

art therapy. *Credentialed Professional Members* are individuals who have been dually approved for Professional Membership by AATA and Registration (ATR) by ATCB.

Much confusion has been expressed regarding AATA dues and ATCB maintenance fees. *Dues for membership* are paid annually to AATA. The *annual maintenance fee* for registration as an art therapist is billed separately by ATCB.

We are currently in the process of designing a new practice analysis survey that will be distributed to a random sample of registered and board certified art therapists. The survey will provide us with information regarding the skills necessary to practice effectively. The certification exam is based on the responses to the survey. Your input is greatly valued.

Registration and board certification offer art therapists an opportunity to solidify their identity and role within the art therapy community and beyond. As we strive to establish our credibility, these credentials serve to inform the public that specific established criteria have been met. Registration is earned through the completion of an academic degree and the accrual of practice hours. Board certification is the national standard by which an art therapist is able to notify the public that he or she has demonstrated, through successful completion of the examination, that he or she has the basic knowledge and competency to practice.

Each of us has the opportunity to participate together to educate the public regarding both the field of art therapy and the importance of credentialing. By becoming an active member of AATA, we can educate the professional world about our services and continually update and enhance our skills as art therapists. By gaining and maintaining credentials through ATCB, we are participating in the important work of protecting those who utilize our professional services. ●

Do Credentials Really Matter?

Joan Phillips, MA, MS, LMFT, LPC, ATR-BC, Director

This may seem an odd question coming from one of the ATCB directors, but I think it is a valid one to ask and one that many art therapists, and the public as well, should ask: What difference does it make if we have the ATR or ATR-BC?

In many instances, it makes little or no difference; the public has no awareness of the training or experience that is required for these designations to appear behind an art therapist's name. The credential cannot guarantee a particular level of service or sensitivity. Certainly we all know the credential cannot guarantee a certain level of employment. So why obtain them?

For me, a credential is a marker of intention and commitment regarding the profession and practice of art therapy. By identifying ourselves, our training, and our willingness to test ourselves on some level of knowledge, we indicate to our peers and to the public that we are **art therapists**. Flawed as tests can be, the certification exam development process not only results in updated certification examinations, but it also helps the profession of art therapy look closely at what we define as our parameters, skills, and necessary knowledge base. I cannot think of any other process in our field that has done more to move us ahead in articulating our field.

This process, sometimes fraught with controversy, still moves us closer to both understanding ourselves and in making our work understandable and accessible to the public. Which brings me to the real reason I think credentials are important: the public. How would an individual seeking therapy even begin to identify someone who could provide art therapy services? The ATR is a way to offer such identification—thus the consumer *is* guaranteed that a practitioner bearing these initials

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By identifying ourselves, our training, and our willingness to test our knowledge, we indicate to our peers and to the public that we are art therapists.

has met educational standards developed by the field. In addition, the board certification process ensures that the

ATR is obtaining ongoing continuing education as well.

I believe the public deserves this minimal level of accountability from our profession—regardless of what personal gain (or not) an individual art therapist may experience as a result of obtaining credentials. Too often our debates over credentials revolve around our own self-interest. Let's remember that the ultimate goal is to provide the public (including third-party payment sources, educational facilities, and legislative bodies) with a standard for our field that they can look to with some consistency and trust. ●

Recertification Options Changed

Don Crutcher, ATR-BC, Recertification Committee Chair

At its fall 1999 annual board meeting, the ATCB Board voted to eliminate the option of certificants passing the current certification examination as a means to recertify. This shall be effective for those individuals who recertify effective January 1, 2005. Those individuals who are currently credentialed and recertify between now and January 2004 continue to be eligible to use this option to recertify. The ATCB Board, with input from certificants, determined that the concept of taking an entry-level certification examination to recertify was incongruent with the intent of the organization to increase the professional competence level of certificants and standards of the profession through continuing education.

Recertification Committee members, in conjunction with the national office, are currently in the process of verifying the CECs of the audit group that was randomly selected from the certificants that filed applications to recertify, effective January 1, 2000. These certificants have had their current certification period extended until the process is completed. All other certificants have received their notice of renewal for the next five-year period. Three hundred and eighty-five applicants were recertified.

The national office will be sending out a questionnaire to those certificants who chose not to recertify requesting information on why they chose not to recertify: whether it be for financial reasons, lack of need for the credential, or other reasons. We strongly request that these individuals return the questionnaire so that we may determine ways to assist in making the credential a more valued and relevant document for certificants.

Remembering Nancy Mayer Knapp

Submitted by David Knapp

Nancy Mayer Knapp was born in Tooele, Utah, on April 28, 1932. She entered Fountain Valley Regional Hospital on October 15, 1999, and died there on December 3 after intestinal surgery followed by complications involving first her lungs and finally her kidneys. Nancy's life was committed to education, her family, and service to others. Being an ATCB board member was one such service. To all of her endeavors she brought wisdom, energy, and creative good humor.



**Nancy Mayer
Knapp**

Nancy began her higher education at Scripps College where she received a degree in art history and fine arts in 1954. That same year she married David Knapp. They shared four children: Amy of New York City; Andy of Durham, North Carolina; Susan of Westfield, New Jersey; and Liza of Memphis, Tennessee; as well as five grandchildren—Emily, Ellen, Michael, Eric, and Kathryn.

While her children were growing up, Nancy was active in their public schools, worked for fair housing in California, and helped to found an organization to provide play equipment in a park along the Columbia River after the family moved to Washington. She became the head teacher for a parent-sponsored class of students with severe special needs—long before programs to meet special needs were mandated and institutionalized. Subsequently, she joined the staff of the Mid-Columbia Mental Health Center to improve socialization among residents.

When her family returned to California in 1975, Nancy continued this work at facilities in Long Beach. Eventually, she combined her interests in art with those in mental health services. She obtained a master's degree in clinical art therapy in 1978 and her doctorate in clinical psychology in 1989. While living in California, Nancy worked as an art therapist in various facilities, trained medical students, and supervised art therapy graduate students. She became licensed as a marriage and family counselor by the California Board of Behavioral Science Examiners and then served as an oral commissioner for that board. She was active in the Southern California Art Therapy Association and was its president from 1981 to 1983.

In 1990, she began teaching psychology and art therapy at Emporia State University in Emporia, Kansas. At Emporia, she led the successful effort to achieve accreditation by the American Art Therapy Association (AATA) for ESU's graduate program in art therapy. In 1994, she was named director of ESU's program and received the Teachers College Outstanding Achievement in Professional Service Award.

Nancy served on the AATA Board of Directors and chaired the organization's archives committee. She was instrumental in moving AATA's archives from the Menninger Clinic in Topeka to the ESU campus in 1999. Until her retirement in May 1999, she served on the board of directors for the Accessible Arts Foundation in Kansas.

Her family, friends, students, and professional colleagues will all miss Nancy's constructive and enthusiastic contributions to their lives. ●

Certification Examination Being Updated

Sandra S. White, ATR-BC,
Certification Committee Chair

The 152 passing candidates who sat in Orlando, New York, Chicago, San Francisco, Kentucky, New Mexico, and Greensboro for the 1999 exam were notified of their results in January. Congratulations to all the new board certified art therapists (see page 6). We acknowledge your accomplishment and welcome your participation in the continuing improvement of the certification process through comments and suggestions for future exams. We already have received several helpful letters and appreciate your input.

This year's committee will be meeting in Greensboro, North Carolina, in late spring and summer to work on the 2000 exam. Questions will be rewritten and refined under the direction of our new consultant, Richard M. Jaeger, Ph.D., who comes to us with many years of experience in research methodology, test development, establishment of performance standards, and educational measurement. We are lucky to have Jaeger's expertise available to the committee and know future exams will continue to improve as we establish greater reliability.

The 2000 exam will be given in St. Louis at the conference, as well as at four or five other sites around the country. The number of different sites continues to grow as more states use the exam for state licensure. Again, congratulations to our new ATR-BCs and hope you all will continue to provide us with valuable input. ●

New ATR-BCs

Jennifer Lynn Allen
Joan Alpers
Cynthia Andreas
Carol A. Andrews
Marcia Lynn Bailey
Cynthia M. Bean
Diane K. Beekman
Daniela Benshalom
Jennifer A. Bettini
Suzanne Bien Bonet
Hope J. Carroll
Jerilynn Clemente
Lucy Lee Collins
Elizabeth A. Coss
Lynn-Marie Cukaj
Luanne D'Angelo
Denise A. Deselle
Mary Devincintis-
Herzog
Kathryn J. Doll
Maris A. Elman
Elizabeth J. Endler
Laura Mary English
Sue R. Etheridge
Allyson Ashby Evans
Kate Fetterolf
Lonni Ann Fredman
Gwen J. Garrett
M. Kathryn Gibson
Linda Girardo-Millard
Jacqueline Richards
Glover
Stephanie Gorski
Dawn Elizabeth Graham
Terri R. Halperin-Eaton
Craig William Hanauer
Kimberly A. Hanrahan-
Havern
Kim M. Hayden
Pamela Malkoff Hayes
Pamela A. Hill
Susan B. Horowitz
Heather Wells Hostetter
Monika Hurter-Hinsch
Brenda Hyman
Kerri Elizabeth Irvine
Jayashree Iyer
Sonia K. Jackson
Lynn Jean Kapitan
Jennifer A. Keimig
Susan V. Kellogg
Patricia A. Kimball
Jean L. Kraljev
Kristin Kaduce Kruzich

Margaret T. Lacio
Kathryn Marion Lapierre
Jennifer A. Lauricella
Meredith S. Lein
Mary L. Ley
Angela J. Linebaugh
Susan D. Loesl
Milica Nikich Loving
Jeannine Mackin-
McGhee
Melissa Maeyens
Daria D. Mainetti
Rafelina Mandarino
Kevin J. Markman
Bonnie H. Marshall
Charles E. Marshall
Deborah J. Marshall
Yvonne Fito Martinez
Christina Barron
McComish
Eileen P. McGann
Mary Ann McGannon
LeVan Kimbrell McLain
Debra A. Mickelsen
Leslie D. Milofsky
Catherine M. Moon
Andrea Poggi Mooney
Brittany Moore
Gwenneth Taylor
Morgan
Mary Patricia Munley
Deborah Debevec
Murphy
Lisa Rose Murray
Guissoo S. Nabavian
Robin R. Neher
Michele M. Neuhaus
Jo Anne Nix
Jean Elizabeth Noble
Meagan O'Connell
Trish K. O'Donnell
Sarah C. O'Koon
Marshae Lynnette Ohms
Penelope P. Orr
Randall L. Overdorff
Heidi Parsons
Elsa Pelier
Jill M. Penaloza
Merle L. Pokempner
Sangeeta Prasad
Ann B. Raber-Herring
Laury F. Rappaport
Noel D. Rastorfer
Beverly B.C. Rodgeron
Laurie Ann Rosen
Caren S. Sacks
Leigh Salgado-Hoyos
Thea Samit

Noa Schwartz
Shannon Marie Scott-
Gomes
Irene P. Shaffer
Julia Sheehan
Ella K. Shoemaker
Deborah I. Sinnette-Baird
Paige Dickinson Smith
Adrienne Nicole Smith
Katherine Anne Smith
Melinda D. Martinek
Smith
Linda Jo Stellato-Pfeiffer
Ruth A. Stenstrom
Rhonda J. Stern
Sheryl B. Stern
Therese A. Svat
Adrienne M. Syphrett
Savneet K. Talwar
Lindsey Catherine
Taucher
Ann K. Tenover
Robin A. Toler
Nancyann Turner
Lois Kay Van Fossen
Megan L. Van Meter
Kathleen S. Vance
Suzanne J. Vinciguerra
Kathryn Jo Vogel
Melissa Brubaker Wahlers
Kathleen Walker
Kathryn A. Webb
Lucy Mueller White
Nancy E. Widdows
Deborah S. Woronoff
Nancy A. Zadravec
Sandra A. Zahn
Marise F. Zimmermann

New ATRs

Jennifer Lynn Allen
Lori S. Andrews
Amy Kathleen Backos
Zivia Bairey
Barbara Ball
Christiana E. Barnes
K. Meagan Barr
Tracy Battaglia-Martin
Daniela Benshalom
Debra S. Bergeron
Jennifer A. Bettini
Melanie Bianca Bien
Elizabeth Renee Black
Christy E. Black
Dayna B. Block
Suzanne Elizabeth Bolger
Faye Boyd-Wright

Reneé M. Boyer
Lisa M. Brazil
Lisa Mariah Bruening
Ranimarie Buen-
Schroeder
Monika Burczyk
Ann B. Burford
Danielle Renee Burnham
Michele L. Burnie
Donna Capaldi
Mary Carini
Janet Carnay
Christina E. M. Carrad
Patricia A. Cauldwell
Amy Elizabeth Cauley
Gail Caulfield
Doris J. Chuang
Barbara L. Cirillo
Peggy Clarkson
Jerilynn Clemente
Eve G. Cohen
Jill K. Cohen Gardner
Barry J. Collen
Michael H. Collins
Karen Cornell
Lynn-Marie Cukaj
Georgette C. D'Amelio
Stephanie Dains
Sara H. DeHart-Young
Maureen C. Del Giacco
Joy April DeNicola
Dolores A. Depaolis
Joan Laurie Jessy Dimen
Janette M. Dingee
Ruth N. Driver
Alex Emerson Dryden
Francoise Ducroz-Zucker
Debra L. Engelbaum
Laura Mary English
Marilyn J. Erickson
Maureen A. Fahy
Sandra Feingold
Rosine Ferber
Kate Fetterolf
Maria Teresa Flores
Frances Fox
Sarah E. Frahm
Lonni Ann Fredman
Lucy H. Gave
Kimberly A. Gazella
Alaina Genduso
Samantha Giamanco-
Benefield
Douglas Gilbert
Ann B. Gilfoyle
Victoria K. Gitterman
Jacqueline Richards
Glover

Diane Goergen
Judy Grossman
Ann C. Gustafson
Janet K. Hailer
Lynn Carol Hammond
Kim M. Hayden
Kathleen Heer
Nicole Heusch
Linda K. Hortter
Jennifer L. Hudepohl
Julia Fauber Hudson
M. Anne Huff
Michelle Iny-Lannan
Kerri Elizabeth Irvine
Eva Andrea Jarrett
Timothy M. Jenkins
Natalie Lynn Jernigan
Laura L. Johnson
MaLinda K. Johnson
Linda A. Kadechuk
Mi Seon Kang
Richard J. Karmik III
Lisa C. Kaufman
H. Tess Keehn
Jennifer A. Keimig
M. Angela D. Kelly
Min Kennedy
Ann Carsile Kider
Sunhee Kim
Virginia F. Kirtland
Shelley Lee Knoodle
Debra Elizabeth Koenitz
Anne Howard Kohn
Paige T. Kovach
Suzanne M. Kraus
Mary A. Kuester
Laura A. Kunze
Brian E. Kupferschmidt
Betsy Lazarus-Leff
Kimberly-Ann N.
Leatherdale
Tania Y. Leonard
Jennifer M. Lesiw
Karen Ann Lewis
Angela J. Linebaugh
Nina Long
Karen Lucas
Melissa C. Mazzio
Janet Gayle Mecca
Carol L. Mellberg
Constance E. Merrell
Laura A. Miller
Leslie D. Milofsky
Deborah Falk Mondello
Tina Marie Montagna
Andrea Poggi Mooney
Janie Giles Morris
Hannah D. Mott

Mary Patricia Munley
 Guissoo S. Nabavian
 Nancy Ann Nainis
 Stacey Lynne Nelson
 Michelle Nienkamp
 Meagan O'Connell
 Sarah C. O'Koon
 Marsha Lynnette Ohms
 Bernice D. Osborne
 Teresa Owens
 Bruce G. Parent
 Susan Janicek Parker
 Heidi Parsons
 Andrea Lyn Pellumbi
 Rebecca C. Perry
 H. Mari Pizanis
 Carole Pletnick
 Stephanie Poggi
 Merle L. Pokempner
 Marilyn Poore
 Christal A. Porter
 Jennifer C. Prager
 Susan Pustilnik
 Anne Quinlan
 Tammy J. Radovich-
 Erickson
 Alisha Sue Rappaport
 Onorina Vedovi Rinker
 Mary M. Ritchie
 Beverly B. C. Rodgerson
 Angelina Henrietta
 Rodriguez
 Kristina Elisabeth
 Rongner
 Nick E. Ryan
 Patricia R. Salmon
 Barbara Schiff
 Stacey Schoenstadt
 Sharon Frances Scott
 Shannon Marie Scott-
 Gomes
 Judith Segev
 Deborah Simone Semel
 Caridad Sierra
 Katherine Anne Simones

Ann C. Skinner-Jones
 Jami M. Slater
 Jamie Deare Sloan
 Wendy Smeltzer
 Katherine Anne Smith
 Melinda D. Martinek
 Smith
 Paige Dickinson Smith
 Naomi Trujillo Smith
 Leanne Smith
 Adrienne Nicole Smith
 Elizabeth Hanna Smith
 Diana L. Steinbock
 Ruth A. Stenstrom
 Megan Sturges
 Daniel Evan Summer
 Lisa Cecile Surbrook
 Margaret Harper Swartz
 Jennifer Swerdlow
 Jane Schweinsberg
 Tabaka
 Wenonah Tantillo
 Burgundy Taylor
 Dianne Tennyson
 Mary Ann Tepe
 Stephen G. Thomas
 Linda Till
 Janette Tingle
 Cheryl J. Turetsky
 Kathleen S. Vance
 Deni James Vasilatos
 Suzanne J. Vinciguerra
 Kathleen Walker
 JeanMarie Warnock
 Karen A. Weinert
 Margaret Weisbrod-
 Morris
 Gail M. Weisman
 Leslie Werlin
 Natasha Westrich-Wood
 Cindy Patricia Wills
 Michael Gerard
 Wintering
 Mary E. Wood
 Joyce Malichanh Yip

Treasurer's Report

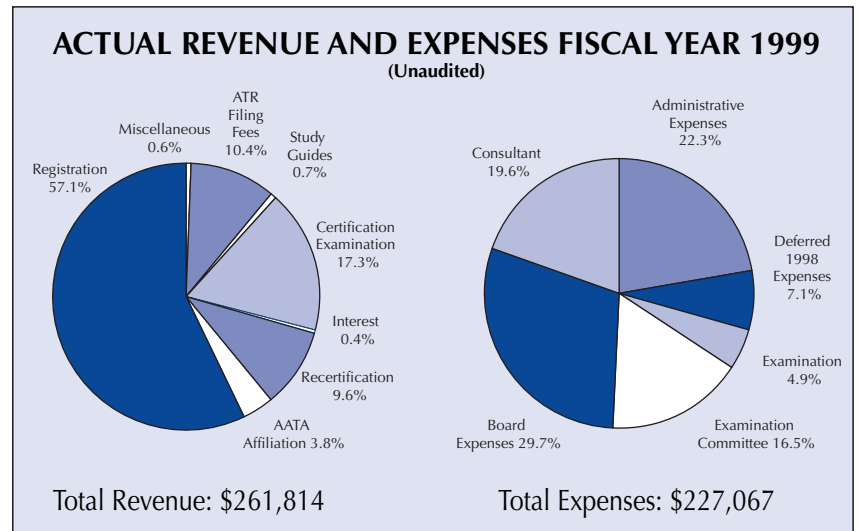
Chris Wilkinson, ATR-BC, Treasurer

I look forward to my term as ATCB treasurer and appreciate the help of Chris Turner and the Center for Credentialing & Education (CCE) in getting me up to speed. ATCB remains in a healthy financial position. For the year 1999, ATCB revenue was \$261,814. Expenses for 1999 were \$227,067, resulting in a net income of \$34,748. The charts below show the distribution of revenue and expenses. The deferred expense is the final payment to Smith Bucklin & Associates for the year 1998.

One area of shortfall in the 1999 budget was a decrease in interest revenue. ATCB's cash balance has been held in a checking account earning little interest. To address this issue, Patty Cates of the CCE was authorized by ATCB to explore the interest rates in money market accounts and certificates of deposit, and to transfer \$100,000 of the reserve fund to increase the interest return to approximately 4 percent. She was also authorized to explore further low-risk investment options, to be brought before the Board of Directors at the spring board meeting. As interest rates increase, stable investment of funds will allow ATCB to increase the ratio of income to expenses.

At the fall meeting, the ATCB Board of Directors voted to keep the ATR maintenance fee at \$50 for this year.

The 2000 budget was calculated by Christine Turner, Patty Cates, and Dana Boylan-Walker and approved at the fall board meeting. It projects revenue of \$245,980 and expenses of \$210,343. ●



Did You Know?
*There are currently ATRs
 in 20 countries around
 the world.*

A Look at ATCB and AATA

S. Christian Smith, NCC, Management Director

First of all, I'd like to thank each of you that have called or written to the Art Therapy Credentials Board (ATCB). We depend on your input to keep the national office and the Board of Directors aware of current developments in the field. I have logged many hours of phone time in the last six months, and continue to learn more about the concerns and priorities of art therapists.

The single issue that generates the most phone calls is related to the relationship of ATCB and the American Art Therapy Association (AATA). ATCB is a credentialing board, and AATA is a membership organization. If your question has to do with your ATR or ATR-BC credential, all communication should be with ATCB. If your question has to do with your membership in AATA, all communication should go to AATA.

ATCB and AATA are two separate organizations with different offices and record-keeping systems. ATCB's office is in Greensboro, North Carolina.

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What is the relationship between ATCB and AATA? ATCB is a credentialing board, and AATA is a membership organization.

AATA's office is in Mundelein, Illinois. Although we work together in representing the profession, we do not share records or accounting processes.

Now that I have discussed the differences between ATCB and AATA, I'd like to discuss what we have in common. ATCB and AATA work together to represent the needs of art therapists and the public they serve. I know from personal experience that the boards of both organizations work diligently to meet your needs and represent your concerns, while at the same time protecting the public (which is the core

mission of ATCB). The current ATCB and AATA presidents, Janet Eskridge and Marcia Rosal, co-authored an article in this edition of the newsletter that outlines the benefits of involvement in both organizations. I strongly encourage each of you to read it, as they have collaborated to produce an excellent article.

As for the national office, we look forward to working with each of you in the future. If you have a concern, please share it with us. Put your thoughts in writing so I can forward a copy to the Board of Directors. We genuinely appreciate your input in further shaping this profession. ●

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