

International survey 2014/2015 on the work of anthroposophic art therapists

Erik W. Baars

Introduction

In 2013 DAKART (Dachverband der internationalen Berufsverbände für Anthroposophische Kunsttherapie), the international umbrella organization of national anthroposophic art therapy associations, decided to start a project in order to get an overview of and more detailed insight in the work of art therapists worldwide. DAKART approached the Professorship Anthroposophic Healthcare (University of Applied Sciences Leiden, The Netherlands) with the question to develop an online questionnaire, to conduct a survey with this questionnaire and to analyze and subsequently write a report about the results.

Materials and Methods

The questionnaire

The questionnaire was developed in close co-creation between DAKART and the Professorship. For logistic reasons all questions and answers were in both English and German (Appendix 1). The final questionnaire contained three parts:

1. General information
2. Detailed information
3. Open space for personal input

The questionnaire was entered into an online monitoring system. Respondents received in 2014 and 2015 from their national art therapy association a link per email, that enabled completing the questionnaire online. Non-responders were re-invited to participate three times.

The respondents

All formal members of the national association of anthroposophic therapy in Austria, Belgium, Brazil, Germany, Italy, The Netherlands, Sweden and Switzerland were invited to complete the questionnaire. A minimum response rate of 40% was regarded to be sufficient to provide a valid estimation. A response rate of 60% and higher was regarded to be good.

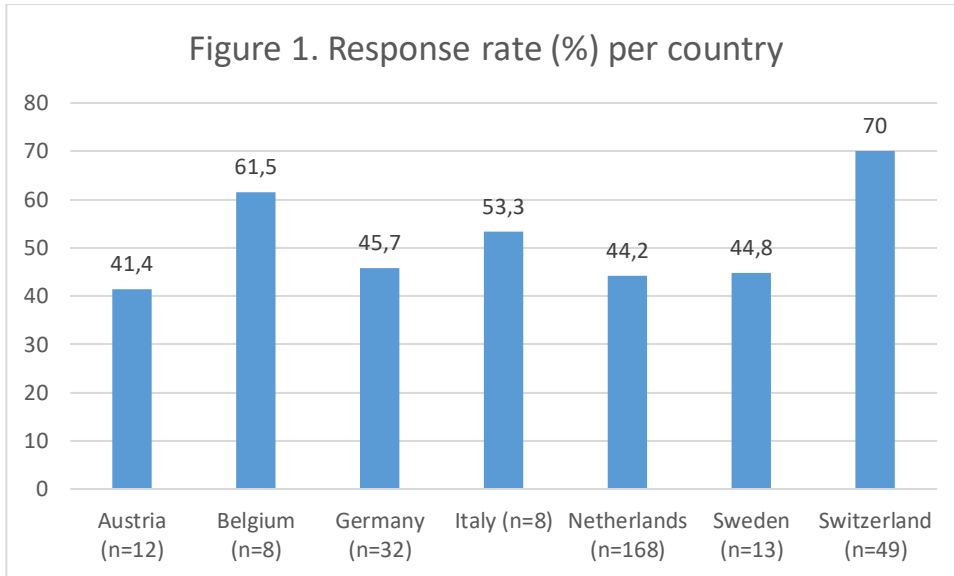
Results

Response

In one of eight participating countries (Brazil) the response rate was too low. Belgium and Switzerland had high response rates (> 60%). The other five countries had response rates between 40% - 60% (Table 1).

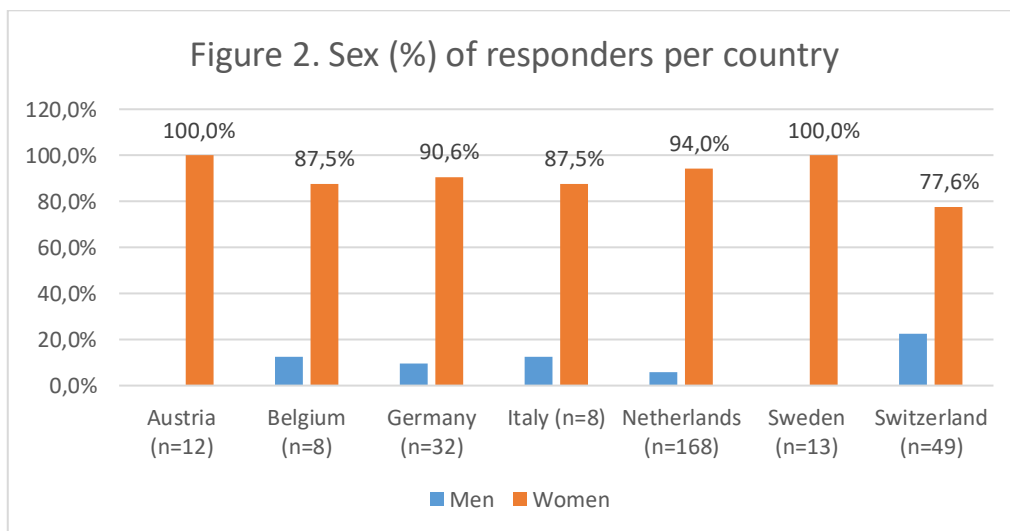
	Number of respondents	Total number invited	Response rate
Austria	12	29	41,4%
Belgium	8	13	61,5%
Brazil	4	44	9,1%
Germany	32	70	45,7%
Italy	8	15	53,3%
Netherlands	168	380	44,2%
Sweden	13	29	44,8%
Switzerland	49	70	70,0%

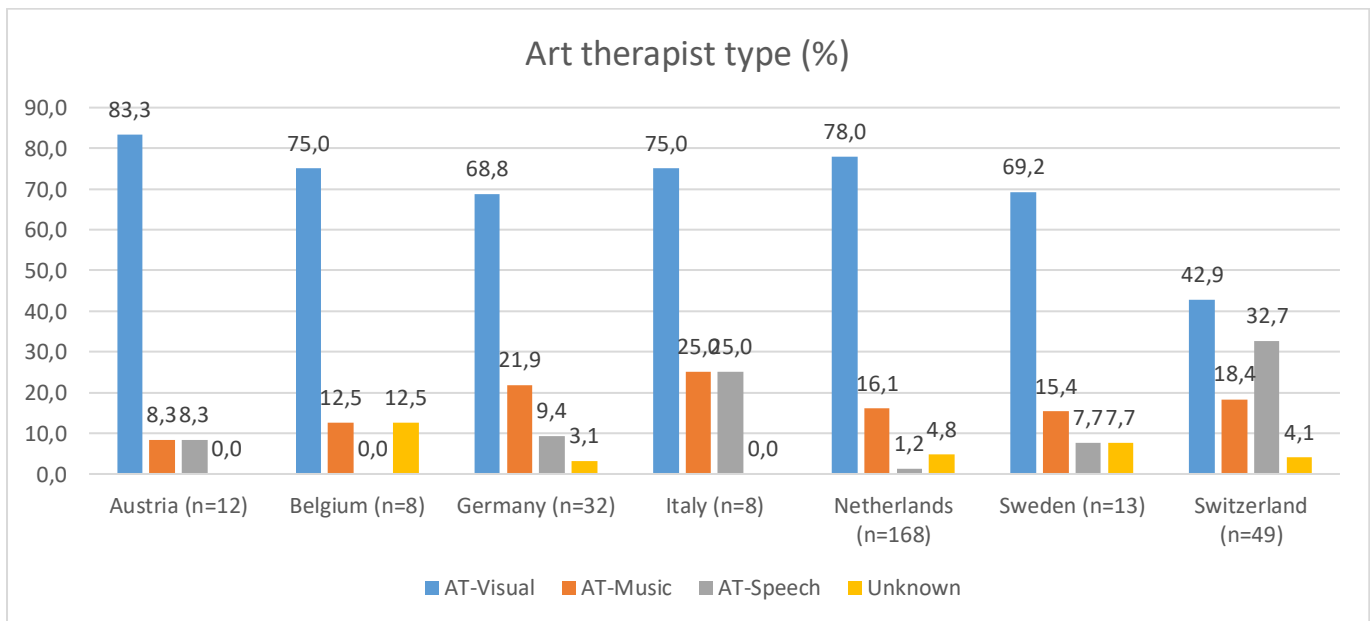
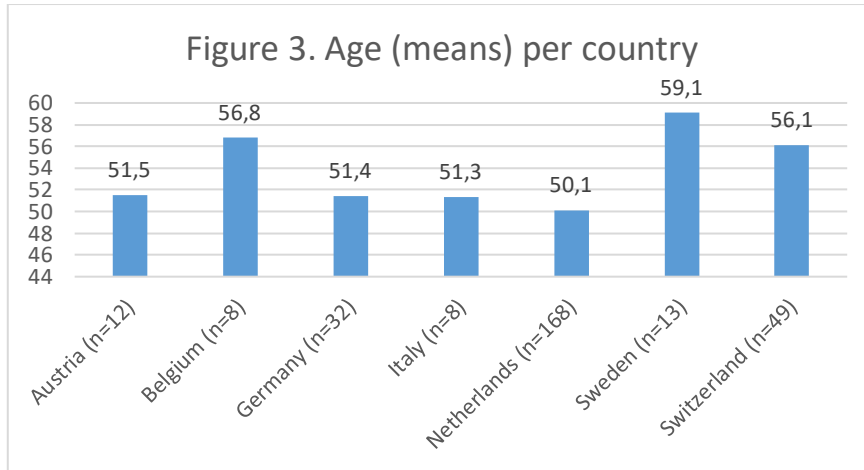
The country with the too low response rate (Brazil) was taken out of the analyses. As a result, analyses are based on seven countries with in total 290 respondents and a mean response rate of 44.6% (290/ 650) (Figure 1).



Demographics

Respondents were 264 women (91%) and 26 men (9%) (Figure 1). The mean age was 52.0 years (SD: 10.7; range: 23 – 74) (Figure 2). Almost three quarter of the respondents was art therapist visual arts (205; 71%), 49 respondents were art therapist music – singing (17%) and 25 were art therapist speech formation (9%). Twelve persons did not complete this question (4%). Almost all respondents (286; 98.6%) were member of a professional association for art therapy (not members: The Netherlands: 3; Sweden: 1) (Figure 3).

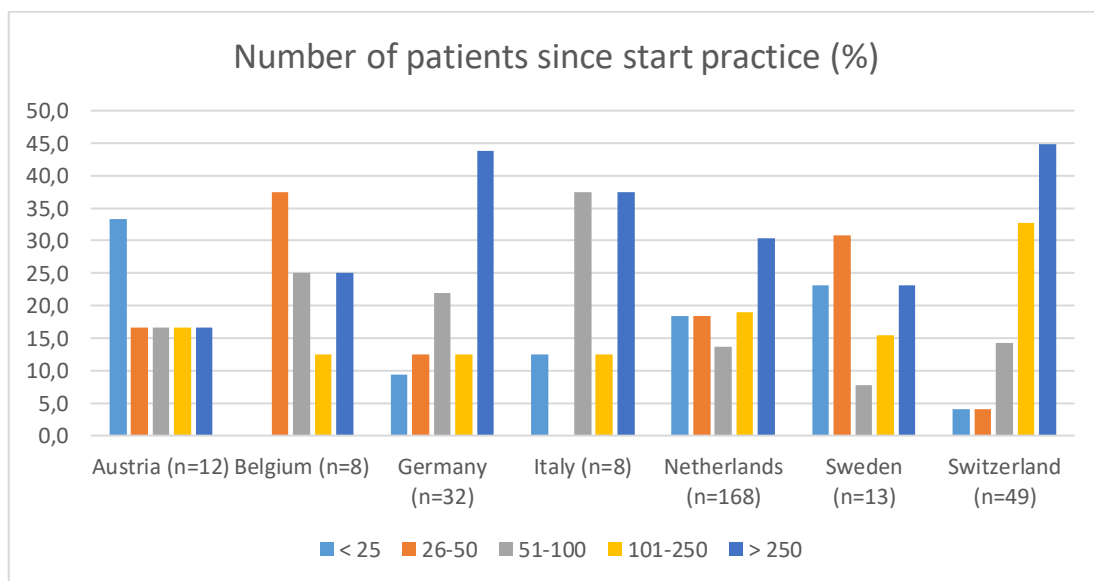
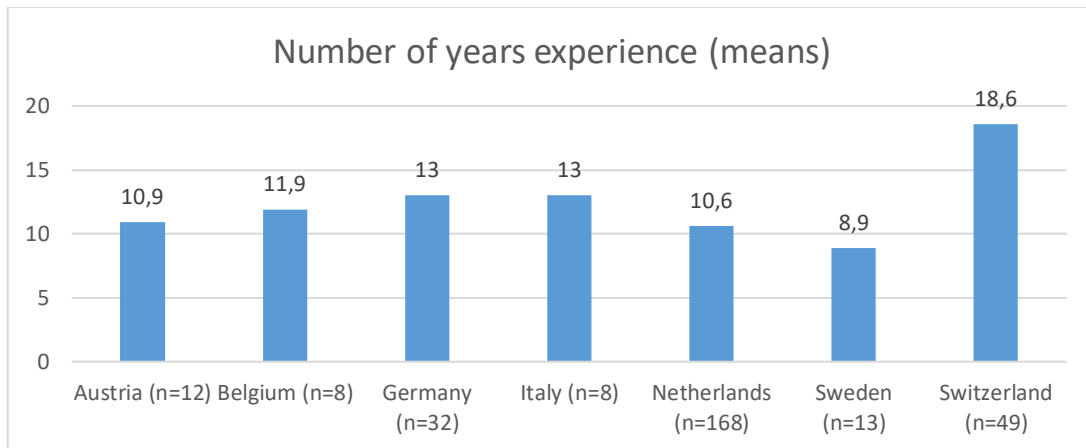




Experience

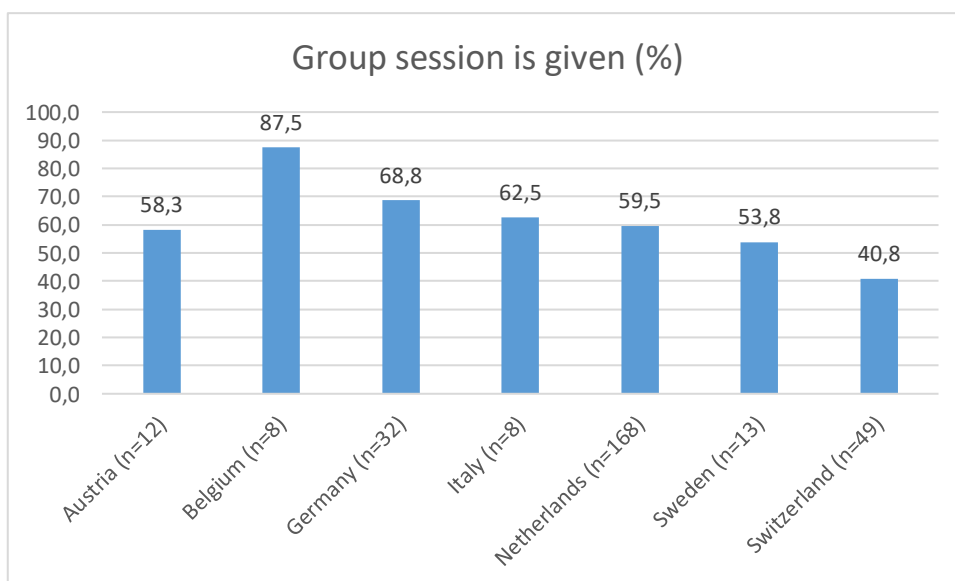
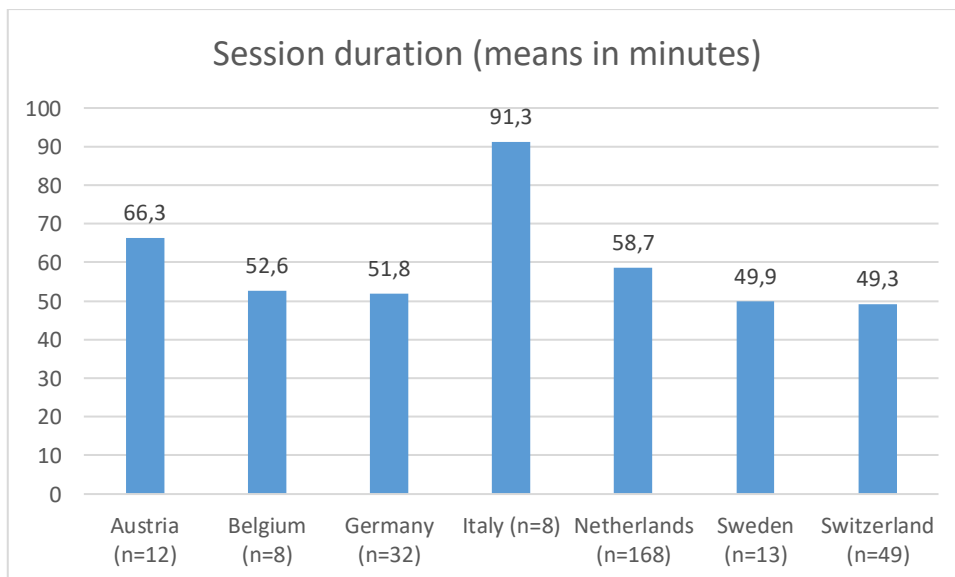
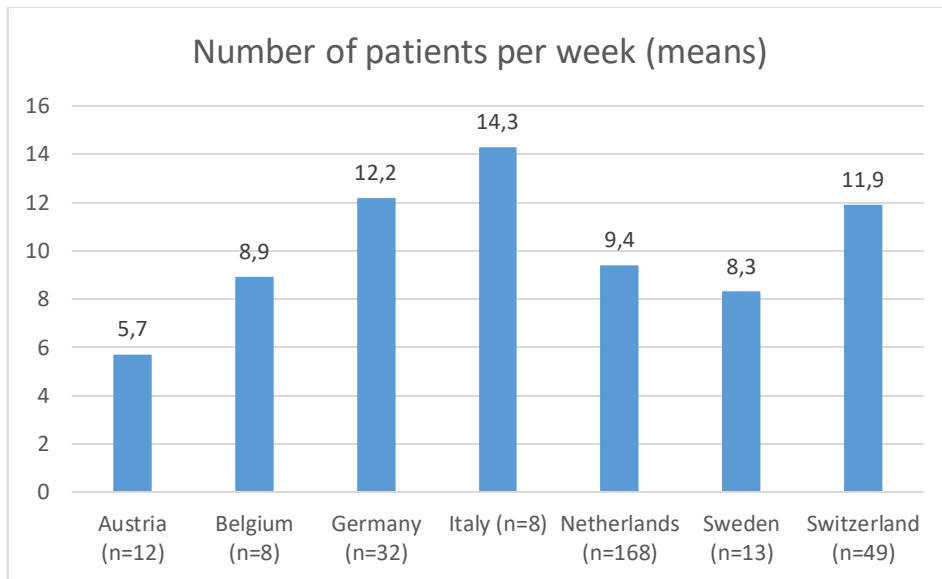
On average respondents have 12.3 years (SD: 8.6; range: 0-50) of experience as an art therapist. The number of patients/ clients the respondents had as an art therapist since they started practicing is:

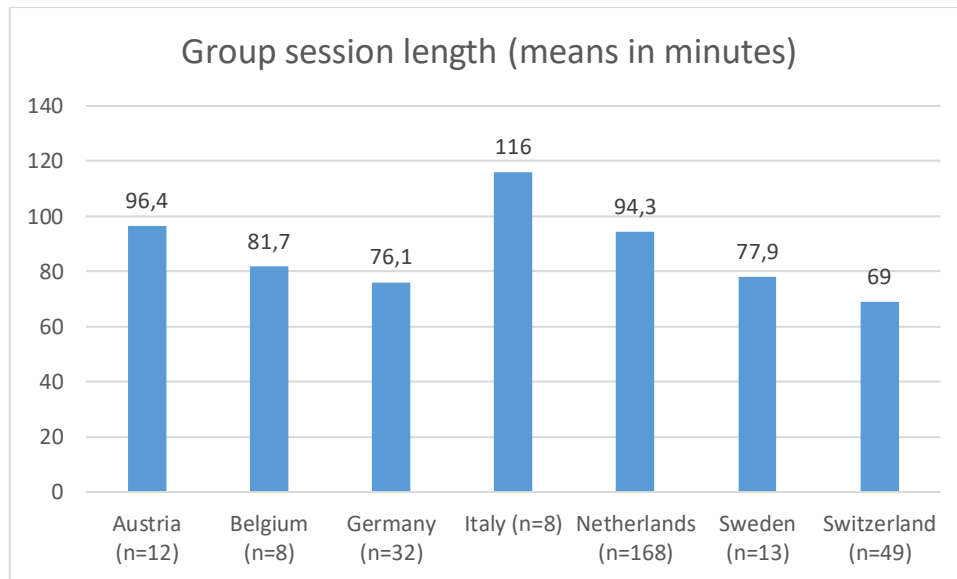
- 25 or less: 44 (15.2%)
- 26-50: 46 (15.9%)
- 51-100: 45 (15.5%)
- 101-250: 58 (20%)
- 250 or more: 97 (33.4%)



Number of patients and session length

On average respondents treat 10.0 patients per week (SD: 8.9; range: 0-60) and have individual sessions of 56.8 minutes (SD: 22.8; range: 0-190). A majority of the art therapists treat patients in group sessions (168, 57.9%) and group sessions on average last 87.5 minutes (SD: 39.2; range: 2-300). The results on the questions how many hours a week art therapists spend on preparation and administration for all patients/clients (travel time not included) could not be calculated, whereas apparently many respondents answered this question in minutes and not in hours (e.g., one therapist treated one patient per week and had 24 hours a week preparation and administration).

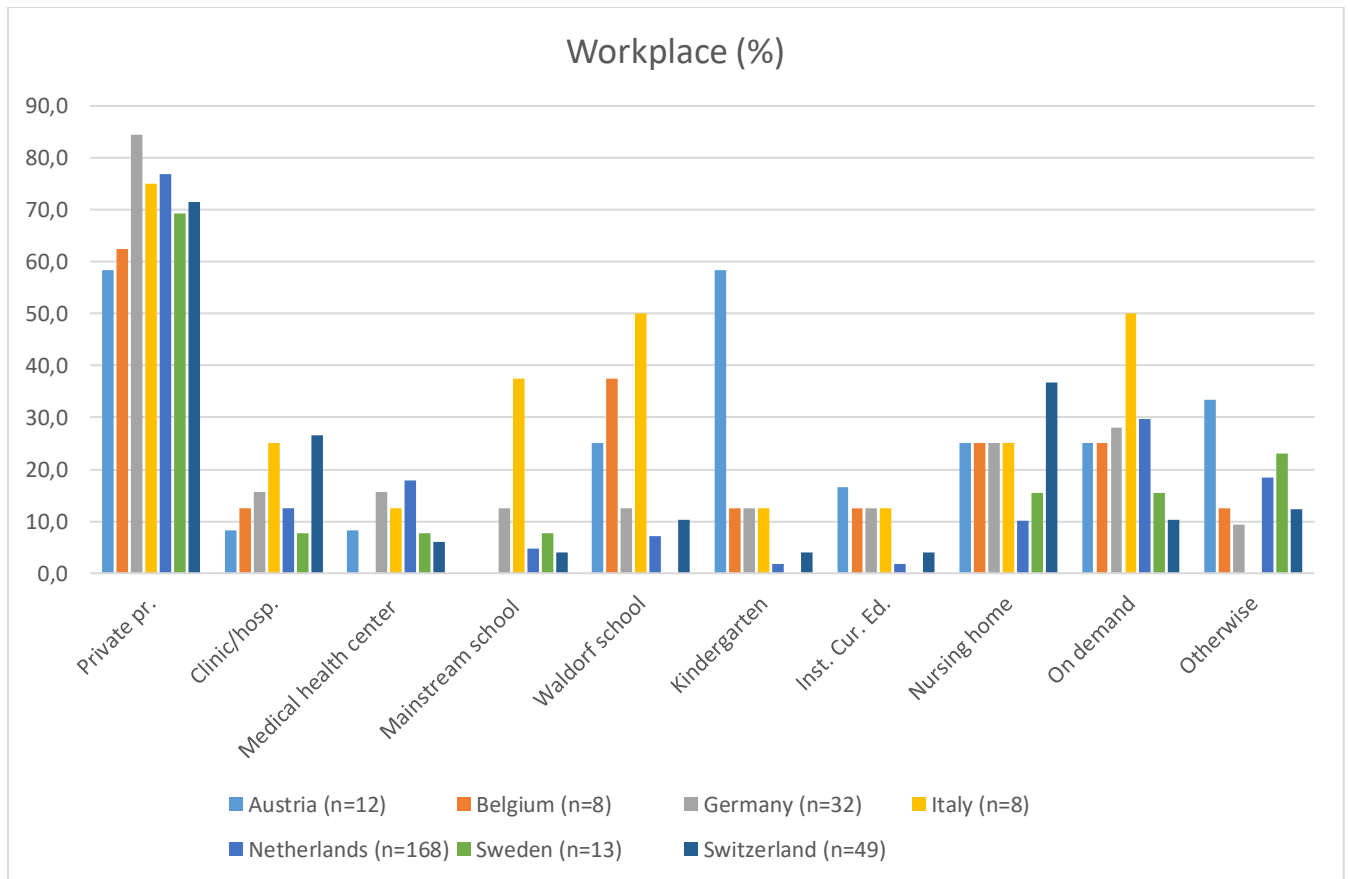




Work place

The places where art therapists work are (in order of frequency) (multiple answers possible):

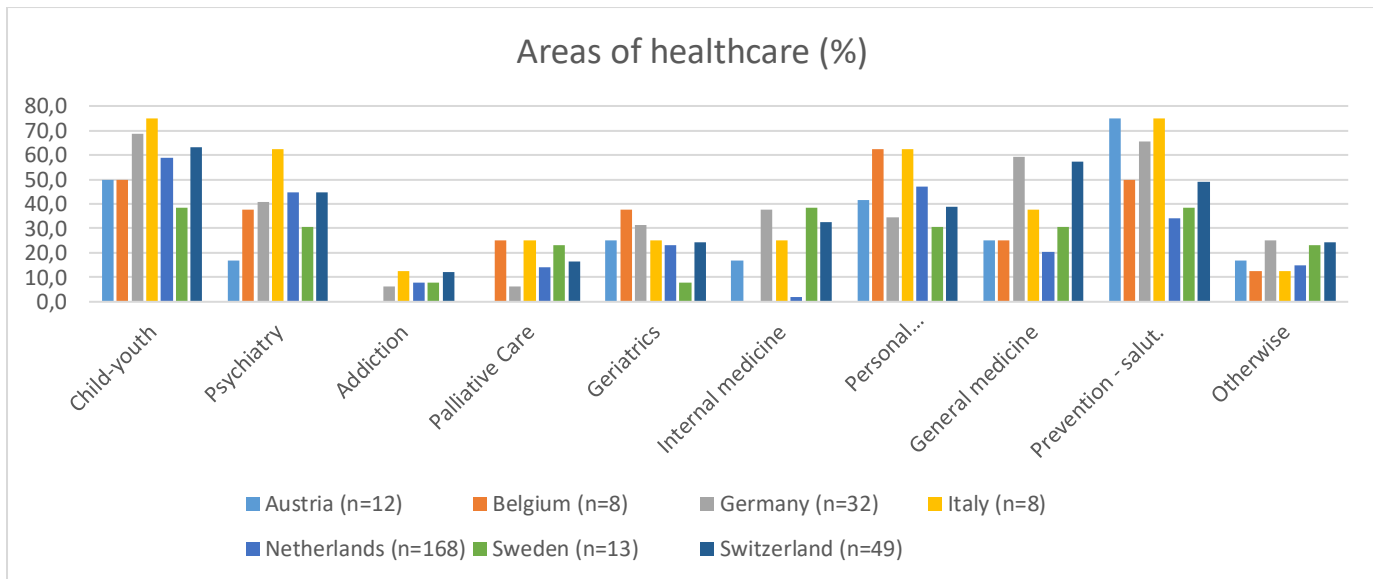
- Private praxis: 218 (75.2%)
- On demand in various places: 75 (25.9%),
- Institution for curative education: 52 (17.9%),
- Clinic or hospital: 44 (15.2%)
- Medical health center / Therapeuticum: 41 (14.1%),
- Nursing home: 34 (11.7%),
- Waldorf school: 31 (10.7%),
- Mainstream school: 18 (6.2%),
- Kindergarten: 13 (4.5%),
- Otherwise: 48 (16.6%) (see Appendix 2)



Areas of healthcare

The areas of healthcare where art therapists work are (in order of frequency) (multiple answers possible):

- Child/ youth: 173 (59.7%)
- Personal development (e.g., team building, teaching, training): 128 (44.1%)
- Prevention – salutogenesis: 126 (43.4%)
- Psychiatry: 124 (42.8%)
- General medicine: 93 (32.1%)
- Geriatrics: 70 (24.1%)
- Palliative care: 41 (14.1%)
- Internal Medicine: 40 (13.8%)
- Addiction care: 23 (7.9%)
- Otherwise: 52 (17.9%) (see Appendix 3)



When we analyze the combination of workplace and areas of healthcare, we see that therapists that work in private practice (218) most often work in the child/ youth (141), the personal development (109), the prevention/ salutogenesis (101) and the psychiatry (91) areas, and hardly in the addiction area (14). Other significant results are that therapists: working in a clinic/ hospital (44) most often work in the psychiatry area (30); therapists working in a medical health center/ therapeuticum (41) most often work in the psychiatry (28), the general medicine (27), the personal development (22) and the prevention/ salutogenesis (22) area; and therapists working on demand in various places (48) most often work in the personal development (21), the prevention/ salutogenesis (20), the psychiatry (17), and the general medicine (17) areas (Table 2).

Table 2. Workplaces per area of healthcare										
	Child- youth	Psychiatry	Addiction	Palliative care	Geriatrics	Internal medicine	Personal development (e.g. team building, teaching, training)	General medicine	Prevention - Salutogenesis	Otherwise
Private practice (N=218)	141	91	14	30	51	31	109	72	101	33
Clinic or hospital (N=44)	15	30	7	15	8	16	9	17	14	8
Medical health center/ Therapeuticum (N=41)	34	28	6	2	5	7	22	27	22	6
Mainstream school (N=18)	15	7	1	4	4	2	7	6	10	4
Waldorf School (N=31)	30	12	3	2	5	5	13	10	18	4
Kindergarten (N=13)	11	2	1	2	5	1	7	4	8	4
Institution for curative education (N=52)	36	23	4	3	8	9	32	20	24	13
Nursing home (N=34)	17	9	2	15	31	1	8	5	11	3
On demand in various places (N=75)	53	30	8	14	23	8	45	21	35	9
Otherwise (N=48)	25	17	2	7	14	6	21	17	20	14

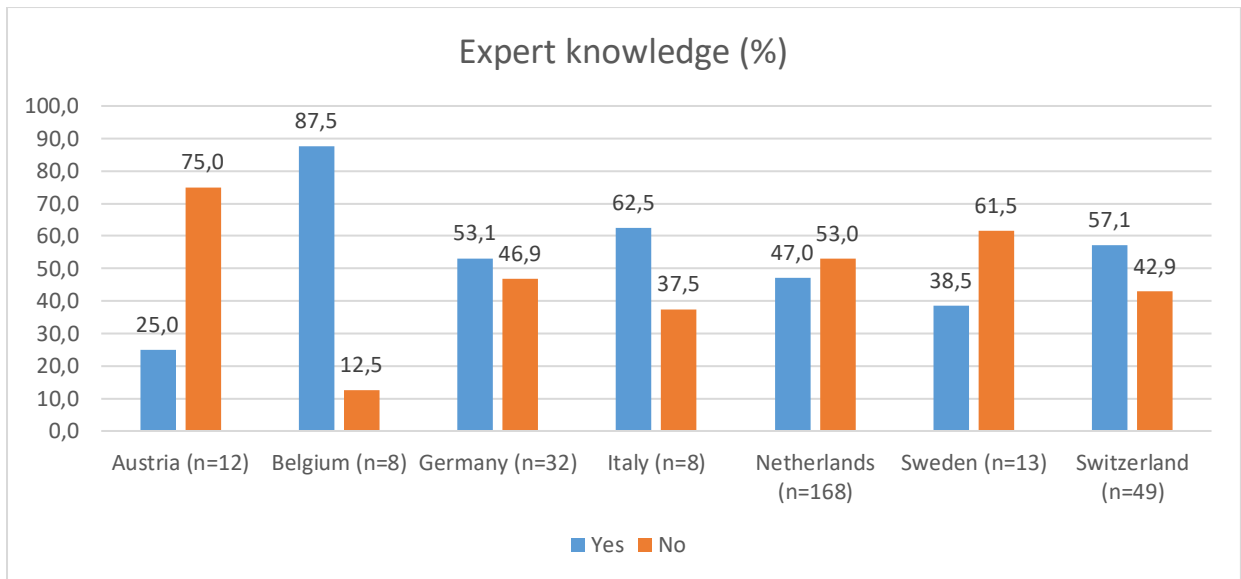
Age groups

On average respondents work with the following age groups (n=278):

- 0-5 years: 2,6%
- 6-10 years: 17%
- 11-20 years: 12.6%
- 21-50 years: 34%
- 51-74 years: 24.3%
- 75-.... years: 20.4%

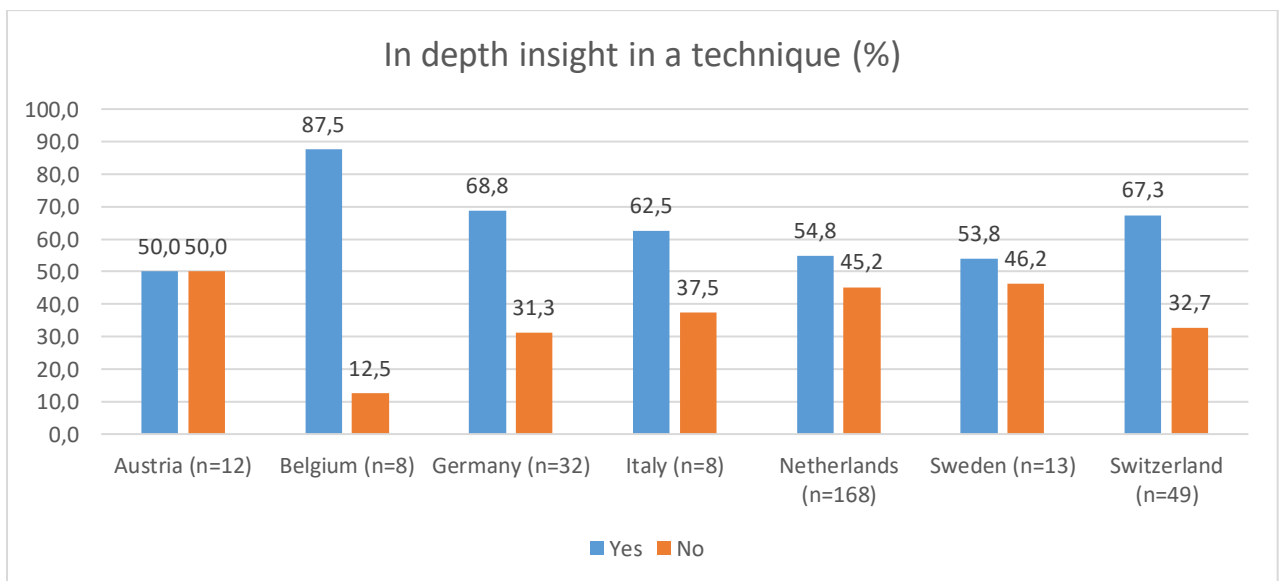
Areas of expertise/ proficiency

Hundred forty-six respondents (50.3%) have gained expert knowledge and/or proficiency (= minimum 5 years' experience with the target group and at least 100 patients/clients treated in this group) (see Appendix 4).



Technique

Hundred seventeen respondents (40.3%) have gained in depth insight in a technique and used this widely in their work (see Appendix 5).

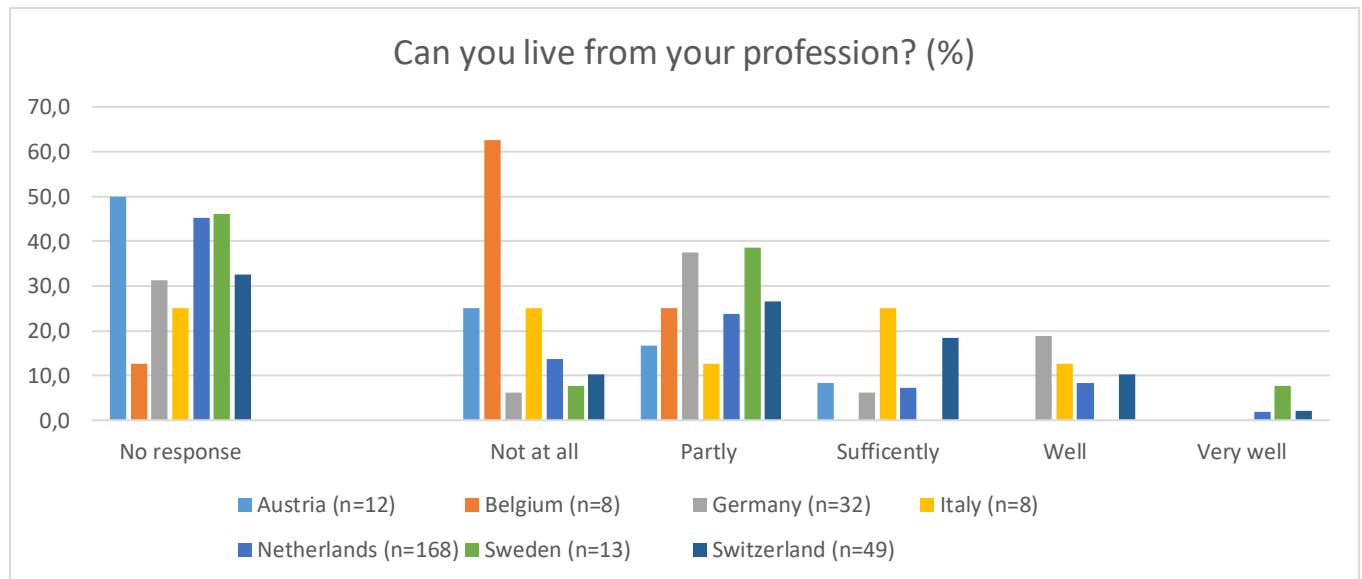


Being able to live from the profession

Most art therapists cannot live from their profession. 57 respondents (10.7%) are able to live from their profession (very well: 5 (1.7%); well: 26 (9.0%) and sufficiently: 26 (9.0%). 116 respondents are not able to live from their profession (partly: 75 (25.9%) and not at all: 41 (14.1%). 117 respondents (40.3%) did not answer this question. The difference between the groups that can and that cannot live from their profession is in this survey only related to the

mean number of patients per week treated. The therapists that cannot live from the profession on average treat 7.8 patients (range: 0-40) per week, the group that can live from the profession treat on average 19.4 patients (range: 4-60) per week.

Forty-two art therapists (14.5%) do currently (also) work in another therapeutic profession. On average they work 18.5 hours (SD: 13.2; range: 0-50) in this other profession (see Appendix 6).

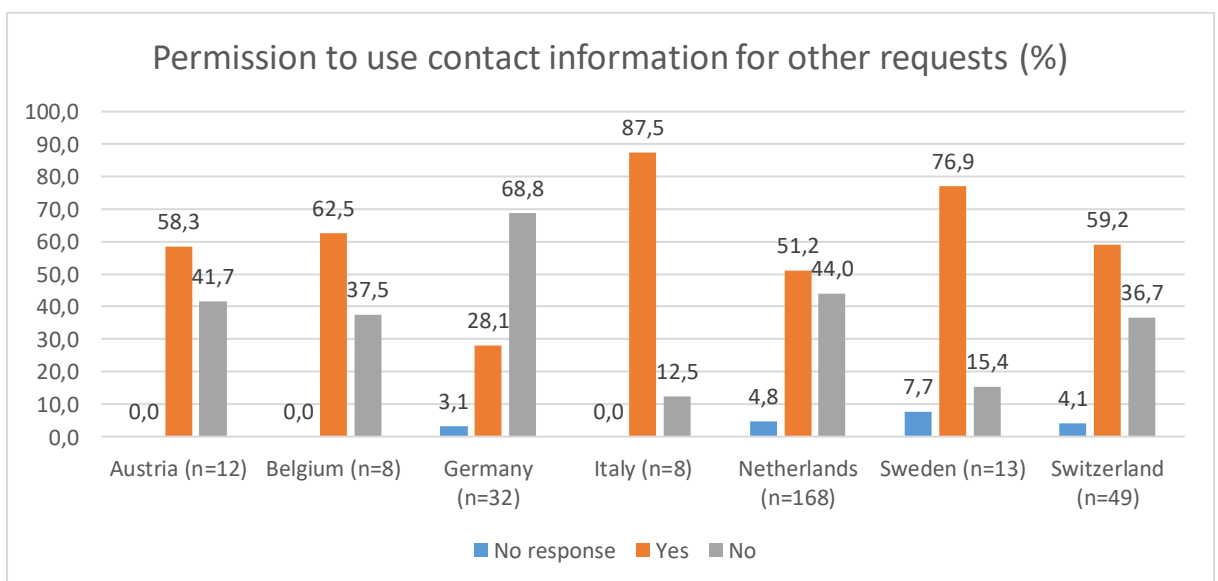
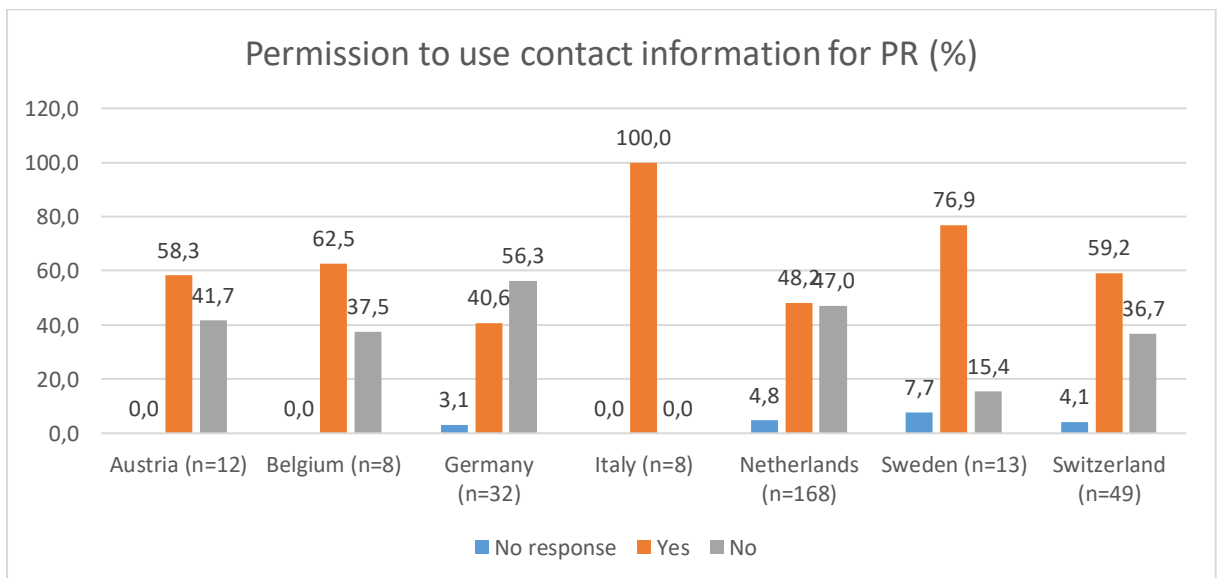
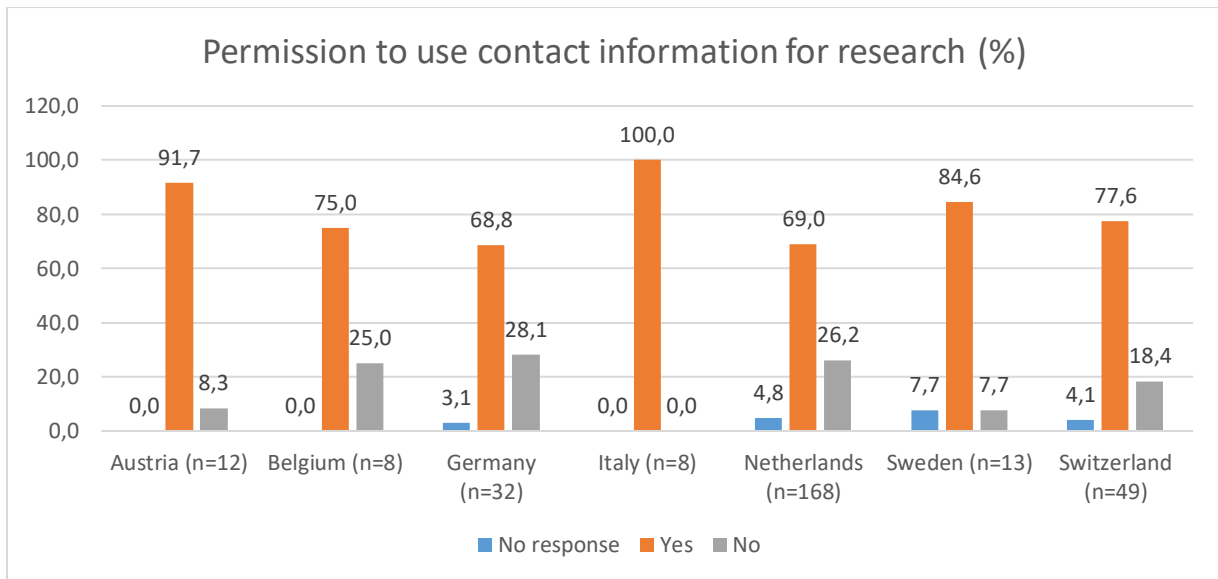


Permission that personal contact information may be used

For research activities, 212 respondents (73.1%) give permission that their contact information (name and email address) may be used by DAKART, the professional association and/ or the Medical Section; 66 (22.8%) do not give permission, and 12 (4.1%) did not complete this question.

For PR activities, 153 art therapists (52.8%) give permission that their contact information (name and email address) may be used by DAKART, the professional association and/ or the Medical Section; 125 (43.1%) do not give permission, and 12 (4.1%) did not complete this question.

For other requests, 154 respondents (53.1%) give permission that that contact information (name and email address) may be used by DAKART, the professional association and/ or the Medical Section; 124 (42.8%) do not give permission, and 12 (4.1%) did not complete this question.



Other remarks

Appendix 7 provides an overview of the final other remarks the respondents provided that they regard important for DAKART.

Appendix 1. The questionnaire

1

This survey is designed by DAKART in order to obtain a global overview of art therapists work. It contains three parts: 1. General information 2. Detailed information 3. Open space for personal input

Diese Umfrage wurde von DAKART konzipiert, um einen Überblick über die Arbeit der Kunsttherapeuten weltweit zu bekommen. Sie besteht aus drei Teilen:

1. Allgemeine Information
2. Detaillierte Angaben
3. Freiraum für persönliche Mitteilungen

2

**PART 1. GENERAL INFORMATION TEIL 1.
ALLGEMEINE INFORMATION**

3

Name: Name:

First name
/ Vorname

Last name
/
Nachname

4

Sex: Geschlecht:

- Male / männlich
- Female / weiblich

5

Age (in years): Alter (in Jahren):

6

In which country do you work? In welchem Land arbeiten Sie?

7

Your profession is: Ihr Beruf ist:

	Yes / Ja	No / Nein	
Art therapist Visual Arts / KunsttherapeutIn Bildende Kunst	<input type="radio"/>	<input type="radio"/>	
Art therapist Music - Singing / KunsttherapeutIn Musik-Gesang	<input type="radio"/>	<input type="radio"/>	
Art therapist Speech Formation / KunsttherapeutIn Sprachgestaltung	<input type="radio"/>	<input type="radio"/>	

8

Are you a member of a professional association for art therapy? Sind Sie Mitglied in einem Berufsverband für Kunsttherapie?

Yes / Ja

No / Nein

9

How many years of experience do you have as an art therapist? Wieviele Jahre Erfahrung haben Sie in Ihrem

Beruf als KunsttherapeutIn?

10

How many patients/clients have you had as an art therapist since you started practicing? Make a rough estimation, for example: 10 (years) x 2 (new patients per month on average) x 12 (months of work per year) = 240 patients/clients. Wieviele Menschen haben Sie bisher insgesamt kunsttherapeutisch begleitet? Bitte eine grobe Schätzung, zum Beispiel: 10 (Jahre) x 2 (neue Patienten/Klienten pro Monat im Durchschnitt) x 12 (Monate Arbeit pro Jahr) = 240 Patienten/Klienten.

- < 25
- 26 - 50
- 51 - 100
- 101 - 250
- 250+

11

PART 2. DETAILED INFORMATION TEIL 2.
DETAILLIERTE ANGABEN

12

On the average, how many patients/ clients do you have per week as an art therapist? Wie viele Menschen begleiten Sie kunsttherapeutisch pro Woche im Durchschnitt

13

What is the average length (minutes) of an individual session? Wie lange (in Minuten) dauert eine Einzelsitzung durchschnittlich?

14

Do you give group sessions? Geben Sie Therapie in Gruppen?

- Yes/ Ja
- No/ Nein [[>> Question 16.](#)]

15

What is the average length (minutes) of a group session? /
Wie lange dauert (in Minuten) eine Einheit mit einer Gruppe durchschnittlich?

16

On the average, how many hours a week do you spend in preparation and administration for all your patients/clients? (dont include travel time) Wie viele Stunden pro Woche verbringen Sie mit Vorbereitung und Administration für alle Ihre Patienten/Klienten (ohne Anfahrtszeit) durchschnittlich?

17

Where do you work (multiple answers possible)? / Wo arbeiten Sie (mehrere Antworten sind möglich)?

: 1

- Private practice / Freie Praxis
- Clinic or hospital / Klinik oder Krankenhaus
- Medical health center / Therapeutikum
- Mainstream school / Staatliche Schule
- Waldorf school / Waldorf Schule
- Kindergarten
- Institution for curative education / Heilpädagogische/ sozialtherapeutische Einrichtung
- Nursing home / Pflegeeinrichtung
- On demand in various places / Arbeit auf Abruf an verschiedenen Stellen
- Otherwise namely (see question 18) / Sonstiges, nämlich (siehe Frage 18)

18

In which other workplace do you work? In welchen anderen Arbeitsstelle arbeiten Sie?

Please answer the question if applicable. Otherwise, answer: NA. / Bitte beantworten Sie die Frage, ob anwendbar. Sonst beantworten Sie mit: NA

19

In which areas of healthcare do you work as an art therapist (multiple answers possible)? In welchen Fachbereichen arbeiten Sie als KunsttherapeutIn (mehrere Antworten möglich)?

: 1

- Child-youth / Kinder-Jugendliche
- Psychiatry / Psychiatrie
- Addiction / Suchthilfe
- Palliative care / Palliative Pflege
- Geriatrics / Geriatrie
- Internal medicine / Innere Medizin
- Personal development (e.g. team building, teaching, training) / Persönliche Entwicklung (Z.B. Teambuildung, Training und Unterricht)
- General medicine / Allgemein Medizin
- Prevention - Salutogenesis / Gesundheitsvorsorge - Salutogenese
- Otherwise namely (see question 20) / Sonstiges, nämlich (siehe Frage 20)

20

In which other area of healthcare do you work? In welchen anderen Fachbereich arbeiten Sie?

Please answer the question if applicable. Otherwise, answer: NA. / Bitte beantworten Sie die Frage, ob anwendbar. Sonst beantworten Sie mit: NA

21

With which age groups do you work? Divide the 100% over the age groups you work with. Mit welchen Altersgruppen arbeiten Sie? Teilen Sie die 100% durch die Altersgruppen mit denen Sie arbeiten.

:

- 0-5
- 6-10
- 11-20
- 21-50
- 51-74
- 75 -

22

Have you gained expert knowledge and/or proficiency (= minimum 5 years experience with the target group and at least 100 patients/clients treated in this group)? Haben Sie Expertenwissen und -können gewonnen (= mindestens 5 Jahre Erfahrung mit der Zielgruppe und mindestens 100 Patienten in der Zielgruppe sind von Ihnen behandelt worden)?

- Yes / Ja
- No / Nein [[>> Question 24.](#)]

23

With which patient/client group(s) have you gained expert knowledge and/or proficiency (= minimum 5 years experience with the target group and at least 100

patients/clients treated in this group)? Mit welcher/n Patientengruppe(n) haben Sie Expertenwissen und -können gewonnen (= mindestens 5 Jahre Erfahrung mit der Zielgruppe und mindestens 100 Patienten in der Zielgruppe sind von Ihnen behandelt worden)?

24

Have you gained in depth insight in a technique and used this widely in your work? Haben sie eine Technik besonders für sich erschlossen und damit reichlich Erfahrungen gesammelt?

: 1

Yes / Ja [[>> Question 25.](#)]

No / Nein [[>> Question 27.](#)]

25

Which technique? Welche Technik?

26

Can you live from your profession as art therapist?
Können Sie von Ihrem Beruf als künstlerische/r
TherapeutIn leben?

- Not at all / Gar nicht
- Partly / Teilweise
- Sufficiently / Ausreichend
- Well / Gut
- Very well / Sehr gut

27

Do you currently (also) work in another therapeutic
profession? Arbeiten Sie momentan (auch) in einem
anderen therapeutische Beruf?

- Yes / Ja [[>> Question 28.](#)]
- No / Nein [[>> Question 30.](#)]

28

My other therapeutic profession is currently: Mein
anderer therapeutischer Beruf ist zurzeit:

29

On the average, how many hours a week do you spend on
your other therapeutic profession? Wie viele Stunden pro
Woche verbringen Sie durchschnittlich mit Ihrem anderen
therapeutischen Beruf?

30

**3. OPEN SPACE FOR PERSONAL INPUT 3.
FREIRAUM FÜR PERSÖNLICHE MITTEILUNGEN**

31

Do you want to tell us something else that you regard important for DAKART? Wollen Sie uns noch etwas mitteilen, dass Sie als wichtig für DAKART erachten?

32

I give permission that my contact information (name and email address) may be used by DAKART, my professional association and/ or the Medical Section for: Ich bin damit einverstanden, dass meine Kontaktdaten (Name und E-Mail-Adresse) durch DAKART, meinen Berufsverband und/ oder die Medizinische Sektion verwendet wird für:

	Yes/ Ja	No/ Nein	
Research / Forschung	<input type="radio"/>	<input type="radio"/>	
PR activities / PR Aktivitäten	<input type="radio"/>	<input type="radio"/>	
Other requests / Anderen Anliegen	<input type="radio"/>	<input type="radio"/>	

Appendix 2. Other workplace

Teacher/ trainer/ supervisor (13x)

School (management) (12x)

Ambulant at patients' home (9x)

Art school/ education (visual art and music) (8x)

Education adults (7x)

Psychiatry (7x)

Hospice (5x)

Teacher primary school (5x)

Teacher higher education (5x)

After school care/ education (4x)

Administration (3x)

Curative education/ social therapy (3x)

Disabled care (3x)

Geriatric day center/ care (3x)

Rehabilitation, resocialization and reintegration center (3x)

Church (2x)

Daycare center for people with brain damage (2x)

Dementia care (2x)

Mentally ill patients (2x)

(Nature) store (2x)

Practice for psychotherapy (2x)

Therapeutikum (2x)

Art course

Art market

Biography courses

Care farm

Centre in town

Chairman association

Children's playgroup

Coaching organizations

Community care - home visits
Day clinic
Day work private enterprise
Education Speech
Flexible workspace
Home for handicapped children
Hospital
Housing for adults with special support
Institution for guidance of young people with problems
Institution for people with special needs
Institute for psychological oncology
Medical section
Monasteries
Music center
NGO
Nursing home
Nursing practice
Office
Other healthcare institution
Palliative Care
Places to rent
Prison
Singer
Social facilities on call
Special schools for behavioral children and adolescents
Store
University
Walk-in for patients with cancer
Welfare work
Work advice centers
Writing books, giving lectures
Youth care institution

Appendix 3. Other area of healthcare

Disabled adults (9x)

Oncology (9x)

Curative education (7x)

(Acquired) brain injuries (6x)

Psychiatry (forensic, elderly, refugees) (6x)

Burn-out/ mourning processing (3x)

Psychosomatics (3x)

Revalidation (3x)

Care for handicapped children/young adults (2x)

Child therapy/ child and adolescent psychotherapy (2x)

Dementia (2x)

Gynecology/ pregnancy/ young mothers (2x)

Prevention (2x)

Social therapy (2x)

Somatic healthcare (2x)

Aphasia

Artistic coaching and therapy - process support in assisted living for people with autism and special needs

Biography

Clinic

Dentist

Developing country

Divorced families

Early rehabilitation

Education

Huntington's disease

Learning difficulties adults

Neurology

Neuropsychology

Nursing home

Psychology

Social art: relationship therapy and family counseling

Self-care for social workers

Urology

Appendix 4. Expert knowledge with groups

Children and adolescents (25x)

Psychiatry (21x)

Oncology (14x)

Geriatrics (13x)

Burnout (8x)

Curative education/ social therapy (7x)

Depression (7x)

Trauma related disorders/ PTSD/ DID (7x)

Autism (6x)

Personal development (6x)

Psychosomatic (6x)

General medicine (5x)

Internal medicine (5x)

Personality disorder (5x)

Chronic pain (4x)

Dementia (4x)

Psychogeriatric (4x)

Stress related problems (4x)

Addiction care (3x)

Disabled children/ adults (3x)

Group therapy (3x)

Gynecology (3x)

Mentally disability care (3x)

Palliative care (3x)

Prevention (3x)

Brain damage (2x)

Cardiovascular (2x)

Immigrants, refugees (2x)

Individual therapy (2x)

Rehabilitation (2x)

Salutogenesis (2x)

Women with a combination of physical and mental problems/ life questions (2x)

Biographical questions / crises (2x)

Age categories:

- 0 - 7
- 5 - 12
- 5 - 16
- 10 – 14
- 12 – 21
- 13 - 18
- 20 – 60
- 21 – 50
- 21 – 70
- 40 –
- 50 – 71
- 51 – 74 (2x)
- Adults (5x)

Abnormalities in children and adolescents

ADD/ ADHD

Advising the German professional associations

Advice and cooperation with German pension insurance, medical associations of the AWMF, universities

Allergies

Anorexia

Anxiety

Art therapy and psychotherapy

Artistic education

Asthma

Bedwetting

Bipolar

Borderline personality disorder

Bowel diseases

Bulimia

Cancer

Child and adolescent psychiatry

Coordination disorders

Developmental supportive art therapy in special education

Double diagnostics (psychiatry & addiction)
Employment office
Entrepreneurship/ business development
Foniatry
Forensic psychiatry
HIV patients
HSP
Interdisciplinary team and interdisciplinary activity
Learning disabilities
Life issues (divorce, mourns, puberty, pension)
Mother and child
Multiple sclerosis
National and international implementation of artistic therapies in guidelines and coding systems
Neurology for adults and children
People in difficult life situations
Problems in language development and pronunciation
Psychosis
Psychotherapy
Rheumatoid arthritis
Research
Respiratory
Schizophrenic disorders
Social and emotional epilepsy
Social skills, KICK, art in contact with children
Special education
Speech and respiratory disorders
Therapeuticum
Unemployed
Unexplained physical complaints
Waldorf school children
Work-related questions
Youth career development

Appendix 5. In dept insight in technique

Painting (developing pictures/ stories, pastel, color theory, plant colors, fairy tales, layering, ...) (39x)

Clay modelling (metamorphoses, ..) (24x)

Wet-on-wet painting (23x)

(Dynamic) form drawing (22x)

Drawing (observation, geometric, body, form, ..) (11x)

Aquarelle (6x)

Light, color and darkness (6x)

(Instrumental) improvisation (5x)

Singing (therapy) (3x)

Speech therapy (3x)

Anthroposophy/ anthroposophic view on man (2x)

Charcoal (2x)

Hauschka (breathing exercises) (2x)

Instruments (2x)

Mixed techniques (2x)

Respiratory therapy with speech (2x)

Soft pastels (2x)

Stone sculpting (2x)

Acryl painting in layers

Anthroposophic music therapy

Anthroposophic way of perception

Art therapy in curative education

Artistic therapy according to Slezak-Schindler

“Beseelte” warm formation in therapeutic speech

“Bilderbucher” on music

Combination of movement, listening and speaking: in the case of the disabled, the connection between touch and language

Empathy in replication

Biographical work

Body-oriented art therapy

Cinabro

Clinical composition
Combination of coaching and working with clay
Communication techniques
Composition - form drawing
Counseling together with painting
Dealing with low sounds
Diagnostic
Drawing and coaching
Drawing and painting combined
"Dry" wet-in-wet
Empathic perception
Expressive techniques
Focusing and art therapy
Greinen
Group therapy
Guideline oncology developed
Hay fever exercises
Integration with other therapies
Intuition
Japanese marbling and collage
Language-accompanying movement
Learning to draw and write
Listen, connect, change with respect
Listening (music)
mandalas
Meditation-related method of perception, which I do with the patient, to his own first free painting
Michael Chekhov Drama
New Adult Learners
Prisma color music
Resource oriented art therapy
Respiration and hexameter
Sculpturing

Self-reflection

Singing according to the school Uncovering the Voice

SMTA

Spatial Dynamics

Speech and drama

Speech therapy, by constitution type (Dr.R.Torriani / Winterthur)

Steiner temperaments

Telling therapeutic stories and fairy tales

Themes and exercises to become conscious of inner life

To address the I of someone

Trauma therapy

Very close to seeing man, to look back on life, to see the future: in word and picture

Visualize with gouache colors

Working with fairytales

Appendix 6. Other profession

Coach (trainer, personal biographical, ..) (5x)

Social therapist (4x)

Social worker (3x)

Care professional (2x)

Child therapist (school) (2x)

Psychiatry (2x)

ACT coach

Attendant care for elderly people with dementia

Aura reader

Cantienica training

Career counselor

child and youth psychotherapist

Curative teacher

English teacher

Graphic designer Department of Medicine

Integrative child and youth therapist/ supervisor

Kindergarten teacher

Kinesiology

Mentor

Metal color light therapist

Music therapy teacher

Naturopathy

Nurse

Occupational therapy

Pedagogics care

Psychological music therapist

Policy officer in care organization

Psychologist

Rhythmical massage

Speech therapist

Voice liberator

Wellness and activation coordinator

Appendix 7. Other remarks

Actually, I'm not work as an artist therapy. I worked at Tobias Clinica 7 year in S Paulo. I moved in 2010 to Holland and now to Spain. I started in Barcelona a new initiative (biography School) I had work with Gudrun Burkhard more than 25 years , also have been worked in art projects in Alliance for Childhood in Brazil. I have difficulties to answer questions because that. I hope to help in this way.
Thanks, Rosa Angela Schoenmaker

Aktuell bin ich pensioniert, die Angaben beziehen sich hauptsächlich auf die Zeit vor der Pensionierung

Als Kunsttherapeutin wünsche ich mir berufliche Anerkennung und gerechte Bezahlung und anerkannte Arbeitsstellen. Aktuell sieht der Arbeitsmarkt sehr sehr schlecht aus und obwohl ich ein 4 jähriges Studium mit Anerkennungszeit im Krankenhaus absolviert habe, muss ich mir von potentiellen Arbeitgebern sagen lassen, dass mein Abschluss nichts ! wert ist.

Altersentsprechend arbeite ich nur noch Teilzeit.

As an art therapist, you are a pioneer and a leader in the society. To get a nominated position in community, you'll have to make yourself visible in your profession. Therefore, besides your profession, you also need to give attention to your presentation to be able to tell your story. As an art therapist you have a mission. Put attention to your marketing & business skills as an entrepreneur to make your practice an success.

At the moment I am pensionary and exercising art therapy very little. Since 5 years I did in addition a course into natural health food.

Because art therapy is hardly known in Belgium I had too few patients. as a result, I got no depth in my work as a art therapist. I didn't think this was healthy situation, not only for me but definitely not for my clients. Made me decided to work only with groups, where my clients work at their personal development. This I do 3 x per week with groups of between 5 and 10 people.

Da ich als Logopädin registriert bin (in den Niederlanden ist das ein anerkannten Beruf und bei den Hausärzten gut bekannt), bekomme ich die meisten Patienten mit eine Überweisung für Logopädie. Sie bekommen fast allen ausschließlich Therapeutische Sprach Gestaltung. Ich bekomme dadurch erheblich mehr Anmeldungen als meine nur als Künstlerischen Therapeut ausgebildeten Kollegen. Die Kunsttherapie läuft über die Zusatzversicherung: Logopädie über die Grundversicherung. Ich lasse Anthroposophisch orientierten Patienten die Wahl ob sie es über die Grundversicherung oder über die Zusatzversicherung laufen lassen möchten: manchen wählen dann die Grundversicherung damit sie mehr Raum in der Zusatzversicherung übrighalten für andere Anthroposophischen Therapien. An der Waldorfschule habe ich als eine der Wenigen in der Niederlanden eine Anstellung von 4 Stunden/Woche: in der Heilpädagogischen Einrichtung arbeite ich von meiner Freie Praxis heraus. vor einigen Jahre haben die meisten Anthroposophischen wie auch viele nicht anthroposophischen Einrichtungen ihren Therapeuten entlassen, um sie wieder von außen ein zu mieten - die Bezahlung läuft dann über die Versicherung der Eltern oder werden Stundenweise mit dem Therapeuten abgerechnet. Es ist damit sehr viel basales Grundwissen aus den Einrichtungen verloren gegangen. Es gelingt oft nicht Kinder/Betreuten gut zu besprechen, mit mehreren anderen Therapeuten oder Arzt oder Begleitern: man ist mehr ein Einzelgänger innerhalb der Institution.

DAKART is important, and I hope this can be communicated to therapists, worldwide. Keep up the good work

Danke für Ihre Arbeit

Die Anzahl Patienten pro Woche täuscht, da ich auch Stationäre behandle, die mehrmals kommen. Ich erteile ca. 30 Gruppen- und Einzelstunden pro Woche.

Die Ärzteschaft hat viel zu wenig Bewusstsein von dem was wir tun und erreichen. Diese Therapieform sollte in der Grundversicherung aufgenommen sein.

Die basale Sinnespflege bedarf größter Aufmerksamkeit

Eine bessere Anerkennung unseres geliebten Berufes ist wünschenswert für die Finanzierung von Therapien. Ideen aus anderen Ländern sind willkommen, da es mir technisch nicht gelang die vorherige Frage zu beantworten: ich arbeite auch als freie bildende Künstlerin. Auch gebe ich viele Kunst Kurse, für Kinder und Erwachsene, selche im Sinne der Salutogenese abgehalten werden. Auf diese Weise erwirtschaftete ich mir meinen Lebensunterhalt. Danke für eure wichtige Arbeit!

Erkennung

Erklärung für: Empathie durch Nacharbeiten Wenn ich einer besonderen Einfühlung für meine KlientInnen nachspüren möchte, oder unsicher bin, wie es weitergehen könnte, arbeite (kopiere) ich das entstandene Werk der Klientin, für mich selbst noch einmal nach. Diese Methode wende ich sowohl beim Plastizieren, als auch beim Malen an.

Es gibt viele individuelle Sachen die ich beachte im therapeutische Situationen: deswegen kann ich nicht viel "allgemeines" dazu sagen.

Es müsste viel mehr seitens der Ärzte für die Therapeuten geworben werden.

Every country has different backgrounds in laws and financial support of therapists. In Belgium it is difficult to make a living of the profession, while patient don't get money payed back. Therefore not many people go to art therapy. If we as therapists want to be in order in the way some other countries (with better repayment) we spend more money in our own education than we earn and still we will never have enough patients as is demanded by the international organization. Therefore the list of demandings should be looked after the situation of the country.

evidence based practice, more recognition

Extra activities next to therapy are needed for sufficient income

For me personally, it is so difficult to see people who need art therapy. There are hardly no doctors who want to send their patients to me. I have so much to give, so I am thinking looking for another job.

Give attention to what works in the art-therapy and why.

Good luck

Habe die Möglichkeit für eigene Praxis, weil ich verheiratet bin und meinen Mann für Haupteinkommen sorgt.

It would be nice if the newly trained young therapists could earn a normal salary in the future. European lobby for our beautiful profession.

It would be nice if a survey like this would also be in NL, there are a few questions that I do not understand well so I probably have not filled in completely truthfully.

I also work as a volunteer in a living group for elderly handicapped people as an art therapist, but didn't know if I should count this as work. I counted it for the question of how many people a week you see.

I am 63 and because of that working less, so my figures are not compactable with my whole career

I am a member of CAHSC

I am a professional artist /painter, that also completes my income.

I am working in a nursing home as occupational therapist. I can do the art therapy because I am occupational therapist. The diploma I have can be subsidiate, not the diploma off art therapist.

I consider it very important to have art-therapy widely known in our healthcare. It's very very difficult to get patients to work with and there's hardly work to do when you work in a private practice.

I finished my studies a year ago, so it is not possible to have a lot of experience yet. Besides giving music therapy, I do give music lessons for special needs children: mentally retarded children, children with a diagnosis in the autism spectrum or with a diagnose like ADHD. These music lessons are on the borderline of therapy and lessons.

I have come to the end of my working career. I now read to children and give them something to do art wise and at the study groups (anthroposophy) I lead the art session after finishing the chapters. In the past year I worked (art therapy wise) with an ill father of a Waldorf School child and with a child together with her mother at the Waldorf School in my home town. This is all I have done lately.

I have just retired from my full time work and will work in a private company with refugees and be able to have art therapy there part-time combined with my counseling work.

I have worked in a Waldorf school, but I had to stop because there was no money for therapies . Im lucky because my husband has a good job.

I like to know what music therapist work in Neonatology. For Holland it is not done till now. I like to start it in my living place.

I realize that I have much experience with different patients, but until now, I have not written about my experiences.....This is a kind of wake-up-call..... (I knew this already, but it wakes me up again....). Success!

I want with all that I know gathered in the 20 years do something. I have worked with the anthroposophy in all her glory and I think I do understand something. I think that there is a need for exchange of knowledge by elderly therapist. Please in Dornach!!!!

I will thank DAKART for the great work you do in the field of art-therapy !

I work in another area to generate income. I don't think I would be able to have total income as an art therapist, also because of my health.

I worked for 12 years in a Nursery home. Now I have be dismissed because of economic reasons. I worked there therapeutically and for Salutogenesis.

I would like to be informed about evidence based results of art therapy

Ich arbeite als Heileurythmistin in einem Altersheim.

Ich arbeite auch als Ausbildnerin in einer Kunsttherapeutischen Ausbildung und auch in Bereich Saluto -und Hygiogenese mit spezifischen Gruppen z.B bei IPMT, Interessenten der Goetheanistischen Kunst, hauptsächlich in Plastizieren (methamorphosen Reihen) aber auch Schrafur, Kohlezeichen und Malen.

Ich arbeite auch als Schauspielerin, und als Leiterin eines Sprechchor

Ich arbeite auch wie eine Aktivitäten Begleiterin im Psychiatrie

Ich bin froh über diese Umfrage und hoffe das sich viele Kunst Therapeuten beteiligen. Vielen Dank
ich bin jetzt nicht mehr beruflich tätig, aber mache jetzt Fortbildungskursen für meine jüngere
Kollegen, die interessiert sein in die durch mir entwickelte Methode:

Ich denke das Fortbildungen sehr wichtig sind und auch das die Ergänzung der Eigene Arbeitsbereich
mit Grundkenntnis von anderen Kunst Therapie Formen und bereichern und unsere Einseitigkeiten
ausgleichen. Ich finde auch die Multidisziplinäritat besonderen in schwere Therapie Fälle sehr
wichtig.

Ich habe eine 80% Stelle als Werklehrer an einer anthroposophischen heilpädagogischen Einrichtung
inne, wo ich die Therapeutischen Erfahrungen einfließen.

ich habe wohl Expertenwissen in der Arbeit mit Menschen mit Behinderungen, auch in der
Sprachanbahnung, erreiche aber die Zahl von 100 Patienten nicht.

Ich kann von meinem kunsttherapeutischen Beruf teilweise leben. (Die Frage hatte ich nur auf dem
Papier, nicht online!?) Was ist NA für eine Antwort?

ich konnte in diesen drei Jahren Erfahrungen sammeln die ich keineswegs missen möchte.

ich mache gerade die Weiterbildung "Trauma und Notfallkunsttherapie" ebenso wie "Kinder und
Jugendlichen Kunst Therapie" an der Alanus Hochschule spreche fließend Spanisch (gebürtige
Argentinierin), habe 10 Jahre in Thailand und Laos gelebt und würde gerne an internationalen
Einsätzen teilnehmen. Falls mal Bedarf besteht, bitte melden. Mit freundlichen Grüßen, Cristina
Möstl

I cannot look back on my answers, I suspect I did not answer a question correctly

I would like to work more, but I do not know how to do that.

Im Moment arbeite ich weniger in der Praxis, weil die Arbeit in de Hochschule viel Zeit nimmt. Da
arbeite ich 11 Jahre als Dozentin.

In Sweden we are not allowed to call ourselves therapist within the Swedish medical system, we must
therefore call ourselves some other, art pedagogic or the like. This is if we want to work within the
Swedish medical system. In our own practice we are Art therapists.

Informing art-therapist more directly and regularly about DAKART-activities can support them by
feeling more connected worldwide.

Is it necessary to treat 100 clients in order to have enough experience / expertise?

It is important to have a strong European representation of our interests externally that will help us to
make a good living from our profession and it is also very important to have strong democratic-direct
democratic-structures internally, that will make it possible to the majority to participate and will
prevent bureaucratic government. Regards

It is not possible for me to gain an income, so I work in a factory since I have to work to earn a living.
Therefore there's no time or energy left to practice art therapy. I am not happy with this. Maybe time
will change and me too.

It is very difficult working in Belgium where there is no state recognition. One cannot survive from
the small anthroposophic community and other people don't know what an art therapist is. Even the
anthroposophic doctors here in Belgium don't manage to refer many patients in my experience.
Patients have to pay privately and this is a huge problem. Creative therapists are trained here at

government high schools, and they have recognized degrees and are subsidisable and employable, we are not.

It is very hard to have enough clients for your registration. I think it is very important that we need to give as much information as possible about the possibilities of art therapy.

It is very important that the insurance covers the art therapy. A good organized professional organization backup is necessary for this.

It's difficult to work in the Netherlands as an art therapist for children. There are few places you can work and those places are occupied with older therapists, who (understandingly) keep their job. So I choose to reeducate myself and become a teacher, in the hope that when I work on a school, I could slowly show the worth of the therapy for children.

It is a pity that it is so difficult to become a member of the German professional association!

Just closed practice because of lack of clients and loss of registration. Profession may profit from networking with anthroposophic doctors. But....there are too few of them. Therefore connecting with other spiritually oriented professionals may be helpful. Greetings!

Klankmassage ist einer von meiner Spezialitäten, aber kein 100 Patienten bis jetzt

Leider gibt es zu wenig Ärzte, die Zuweisungen für Kunsttherapie im ambulanten Bereich machen.

Let's try to unify and make stronger the name of art therapy. We give psychological care, and it happen that we use different materials to reach healing goals. Let's remove the word art that (it is a pity I admit) has a non-serious/medical association. Art scares too many people. With another name we might reach more people. Thank you !

lokale Arbeitsgruppen (Intervision) sind gefragt, wo erfahrene KT's und StudentInnen in offenem Austausch stehen bezüglich praktischen Erfahrungen. Ebenso zum eigenen Umgang der inneren Schulung, Meditation.

Meetings with colleges and having practices

My goal is to connect the anthroposophic view with the neurologic music therapy (NMT) . I think for the future of the antro. art therapy this might be very helpful.

My qualities as art-therapist I also use in my teaching within the training for curative education by using arts here and in Russia. To me this kind of teaching is as valuable as the therapies themselves. For a healthy future for the art therapist. This does not come so much forward in the choices one can make for DAKART

My therapy work is based on the principles of Liane Collot dHerbois, Light, Darkness and Color. It is not possible to work out techniques, because every meeting between Light and Darkness is different. My work is mainly with children, therefore the greater part of the therapy is with color: aquarelle on moist on moist paper.

Nicht zu viel quantifizieren

Public Relations, contact with doctors and their assistants is my mainly source of patients in the regular field of health care. Would appreciate if we could do that all together instead of all by myself. To get contact with schools is difficult in my place of living, schools and their teachers choose for integrative child therapy, which is more well-known in this field.

Schönen Tag noch !

Schwerpunkt Musik und Bewegung

SMTA is een wetenschappelijk onderbouwde methode die in opkomst is. Ik kan de opleiding aanbevelen aan andere muziektherapeuten omdat deze scoort in reguliere instellingen en goede resultaten geeft in combinatie met logopedie.

Speech therapy have a big effect in psychiatry.

The need of working for the association of art therapy in Holland

The question of the time for preparing, administration etc.: this is not absolute time but relative! For me it is about half the time of my working hours.

There is not enough recognition for our profession in the mainstream healthcare and education. In the anthroposophical healthcare and education no referrals to a private practice. No jobs available.

Unser Beruf ist so wichtig heutzutage es braucht GUTE publik Relation! Und gesamt Wirkung mit Arzte.

Unter Punkt 21: Ich kann gar nicht von meinem Beruf leben, hab ich das falsch angekreuzt?

Unterstützung für Forschung: Projekt Fähigkeit, Koordination mit Forschungsbegleitung, Finanzielle Hilfe für Freistellung und Durchführung von Forschungsprojekten. Ausrichtung der Ausbildungen auf künstlerischer Fähigkeit-Basis und Fähigkeit zum therapeutischen Umgang mit Patienten.

Verordnungsbereitschaft besonders der Anthroposophischen Ärzte-mangelhaft, Berufsrechtliche Klärung nicht gelungen, schlechte Vernetzung von Kunsttherapeutischen Angeboten und Patientennachfrage, Vernachlässigung der Kunstausbildung in der Hochschulausbildung-Kunsttherapie

Warum ist diese Umfrage nicht anonymisiert?

Was machen Sie mit den Antworten? Was planen Sie? Warum wollen sie das wissen? Wichtig finde ich, dass sich die DAKART für die Kooperation mit anderen - nicht anthroposophischen Künstlerischen Therapien - einsetzt. Die Qualifizierung der Künstlerischen Therapien und insbesondere die der anthroposophischen Kunsttherapie sollte auch auf dieser Ebene transparent sein.

Working as an art therapist in Flanders is still pioneering work. That is energy-boosting. DAKART has special significance as a central connecting body: also between the European Academy and the association of professional associations and as a forum for mutual exchange

Wichtig ist auch zu wissen wieviel Möglichkeit ein Therapeut persönlich hat zu arbeiten als z.B. ein Elter. Und wieviel Frage nach Therapie es gibt, wieviel Mühe er sich geben muss um Klienten zu werfen.

Wie ist die Zusammenarbeit mit den anthrop. Ärzten, gibt es Therapeutenlisten, die direkt an die Ärzte gehen, oder müssen die sich die entsprechenden Therapeutenadressen selber raussuchen?

Work is appreciated as long as I do it voluntary, it seems many times. More doctors could send patients to me and other therapists.

Work to be recognized and more valued as a professions