

articles

Empowering Students Through Creativity: Art Therapy in Miami-Dade County Public Schools

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Abstract

Miami-Dade County Public Schools (M-DCPS) has been at the forefront of integrating art therapy in schools since 1979, helping children with emotional/behavioral disabilities become more receptive to academic involvement while maximizing their social and emotional potential. This article describes the history, development, current configuration, and future outlook for school art therapy services provided by the M-DCPS Clinical Art Therapy Department.

Introduction

All throughout middle school, I had great difficulty controlling my emotions, which negatively affected my relationships, academics, self-esteem, etc. In high school, I began receiving art therapy services. As a result, I have matured, have learned better time management skills, how to manage my stress levels, control my emotions, and stop and analyze situations before exploding like a volcano, as I used to in the past. Art therapy has provided me with an outlet to express my emotions in a much more effective, healthier way. My academics increased, while fights at home and with friends decreased dramatically. In the past, there were many instances at school where I was too upset to concentrate on my assignments or even be inside a classroom [see Figure 1]. Now in my junior year, that doesn't happen anymore. I can put my problems behind me and continue with my work, which in return has enabled me to handle more responsibilities [see Figure 2] My artwork has taught me a lot about myself (the good, and what I need to change), and to see life in totally different perspectives. Art therapy has taught me the discipline to pursue my dreams and goals: many of them have become, and are becoming a reality! Now, I have much more

confidence in myself. These changes in my life didn't occur in one day, but over time, within two years. At times, I still struggle with my anger, but the way I handle my emotions now, compared to how I did in the past, people say I have made a complete 180-degree turn. I am extremely fortunate and grateful that art therapy has become a part of my life. (Written reflection, 16-year-old female student receiving weekly individual art therapy services in school)

This year the Miami-Dade County Public Schools (M-DCPS) Clinical Art Therapy Department is celebrating a milestone. For over 30 years art therapy services have been provided to students with emotional/behavioral disabilities in grades K–12 in one of the largest and most demographically diverse public school systems in the nation (National Institute for Urban School Improvement, 2006). Art therapists in the M-DCPS Clinical Art Therapy Department wrote this article to reflect on the development, accomplishments, and challenges of art therapy within M-DCPS. As the largest employer of art therapists and the oldest school art therapy department in the United States, we have much to share about the department's scope, aims, and practices (Bush, 1997). This article's contributors collectively trace the department's history, growth, and potential to inspire the practice and implementation of art therapy in schools nationwide.

The Pilot Program

Art therapy in Miami-Dade County Public Schools grew out of the need to provide appropriate education and related services for students with disabilities. Through the landmark 1975 U.S. federal legislation known as Public Law 94-142, increased numbers of children who had received inadequate special education services in public schools or who were excluded from school altogether were now able to be served appropriately (U.S. Department of Education, 2000). The law was considered the "Bill of Rights" for children with disabilities. Increased funding for school districts provided the necessary support services for a meaningful education.

The interest, funding, and increased population of students in need of special education made it possible for Janet Bush to introduce a pilot art therapy program in M-

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Figure 1 "Me on the Outside" by Adolescent Girl in Art Therapy Program



Figure 2 "Me on the Inside" by Adolescent Girl in Art Therapy Program

DCPS in the 1979–80 school year. The pilot program was a one-year collaborative effort in the school district. It brought several departments together to provide local school funding, treatment, and educational services to four student populations severely in need of special education: children with autism, children with profound cognitive disabilities, emotionally disabled children, and children with physical

disabilities. Emphasis was placed on the potential for replication of the pilot model and the uniqueness of a combined art education and art therapy service.

The purpose of the program was to help serve students with special needs whose art teachers were unfamiliar with implementing appropriate interventions to deal with the students' presenting problems. These students needed specialized approaches and strategies if they were to be taught effectively, given that the art teachers had not been adequately trained to work with the students in special education. In addition to direct service work, the pilot program included yearlong staff development in art therapy and art education for teachers, parents, and school administrators. Evaluation of the pilot program indicated that the children, who were originally identified as difficult for a regular art teacher, had made excellent progress when working in art therapy. The school personnel, including administrators and support staff, were in favor of continuing the model for the next school year.

From Art Education to Art Therapy

At the end of 1979–80 school year M-DCPS recognized the strengths and advantages of art therapy and allocated funds for four additional art therapists to expand service delivery in the 1980–81 school year. By 1985 there were eight art therapists working in a variety of school programs. The administration of the program was relocated from the Art Education Office to the Division of Special Education. Due to increasing numbers of students identified as severely emotionally disturbed, administrators in the Division of Special Education began asking for additional services for this population. As a direct result of the pilot program, many new art teachers were hired with specific special education background and interest in working with students with disabilities. Specialized staff development continued in order to assist art teachers in providing meaningful art education for these students. Art therapists were each assigned to two schools for two and a half days a week at each site. At this time, the art education classroom component was eliminated from the art therapist schedule. This modification allowed additional time for completing assessments, servicing more students, implementing traditional and clinically based art therapy objectives, and providing more training to school personnel. It also afforded art therapists a greater opportunity to meet with parents, teachers, peer art therapists, and treatment team members to discuss student cases. Art therapists were assigned to programs together with school psychologists, family therapists, social workers, and teachers. With this staffing approach, a school treatment team took shape. Students with emotional/behavioral disabilities were provided with counseling, art therapy, family support services, and educational programming. The model was structured much like clinical day treatment programs traditionally found in psychiatric agencies or hospital settings.

Program Expansion

During the 1989–99 academic years, the program matured. Staff increased substantially from 8, to 14, and finally to 21 full-time art therapists. Each therapist was assigned to either a large special education unit in one school or smaller units in two other schools. The program was titled M-DCPS Clinical Art Therapy Department to emphasize the distinction between art therapy and the fields of art education and psychology (Bush, 1993). The Clinical Art Therapy Department refined its procedures in the areas of consultation, assessment, intervention, professional development, program planning, and evaluation.

As the Clinical Art Therapy Department grew, art therapy staff realized that there was no specific training in school art therapy in the curricula of graduate art therapy programs nationwide. Also, that the art therapists hired to work within M-DCPS had widely varied training and clinical approaches to assessing and working with identified students. This diversity of approach to art therapy was especially apparent as students transitioned from one art therapist to another due to student relocation or graduation from one grade level to the next. The department was challenged with finding a means for speaking a common language among the art therapy staff, which was necessary in reporting documentation for the school district and for addressing student cases as a team. Not only were department members in need of a frame of reference that they could share in their work and communications with one another, but they also recognized a need to communicate to educators how art therapy assisted in helping students access their education to a greater degree. Department members and program administrators determined that a uniform assessment based on measuring both cognitive and emotional development was the solution.

In 1989, and over the course of the next several years, research and implementation of an assessment tool was formulated with the art therapy team under the direction of Myra Levick. Determined by her doctoral research (Levick, 2009), the Levick Emotional and Cognitive Art Therapy Assessment (LECATA) is a comprehensive analysis of five drawing tasks with assessment criteria for determining cognitive scores based on graphic forms and emotional scores based on the child's use of adaptive or maladaptive defense mechanisms as revealed in children's art works. The LECATA became the formal assessment tool for the Clinical Art Therapy Department.

An extensive professional development component also was created and implemented for the Clinical Art Therapy Department at this time. Nationally known art therapists were invited by the department to provide annual professional development sessions that emphasized techniques and strategies needed to carry out effective art therapy treatment. Because M-DCPS art therapists were working with elementary, middle, and high school students within a demographically diverse community, they were afforded the opportunity to expand their cultural competencies as well, which they shared with one

another. The department implemented weekly peer supervision to address treatment strategies and to share new information in art therapy and related fields. Art therapists formed teams within the department to address professional development for teachers, school administrators, and the mental health department personnel. Additionally, art therapists promoted the work and efficacy of the department through art exhibits and presentations throughout Miami-Dade County. The recognition of the validity of art therapy services in M-DCPS led to presentations that were conducted across the country to art therapists, school districts, school administrative groups, special education associations, parent teacher associations, and related school support personnel. Professional interest and awareness of the application in schools gained momentum.

Transitions

At the turn of the millennium, new directions and approaches developed, including the expansion of assessment, greater community outreach and education, and the need to conform to the ever-evolving structure of the educational system. Two assessment tools were added to the repertoire: The Silver Drawing Test and Draw A Story. These assessments use stimulus and response drawings as the primary channel for receiving and expressing ideas, which assisted educators in relating measurable cognitive and emotional functioning to academic performance (Silver, 2007).

The desire to provide students with enriching experiences beyond the traditional construct of the therapy session inspired the district's art therapists to increase their involvement in the larger community. The department partnered with VSA arts of Florida (a state affiliate of the international nonprofit formerly known as Very Special Arts) to bring performance and graphic artists to school sites to work with students with emotional/behavioral disabilities. To supplement and support the needs of the department, art therapists began developing relationships with the community and local merchants who donated services and supplies for programs for students with special needs. Grants from local and national foundations also assisted the department in obtaining funds to pay for professional development, special projects, exhibits, and field trips.

New legislation and testing requirements for all students in public schools led to a shift in focus for the Clinical Art Therapy Department. The Florida Comprehensive Assessment Test (FCAT) was initially introduced into the education vernacular in 1992 as a writing assessment. In January 1998, the framework of the FCAT was expanded to include testing for reading and mathematics. With the establishment of the No Child Left Behind Act of 2001, school administrators began emphasizing the importance of the test because it implicated school and district performance and was heavily tied to state and federal funding. The impact on the student population was a sense of increased anxiety and

pressure to perform well on the test. For a large majority of special education students, this was an extra challenge as many were already performing below grade average and exhibited poor coping strategies for elevated levels of emotional and academic stress.

Art therapists realized a need to address these concerns, having observed escalated maladaptive behaviors and an increase in psychiatric hospitalizations immediately prior to and during testing. Department members shared effective interventions and developed strategies to assist students with emotional/behavioral disabilities during this annual stressor. Throughout the "testing season" the art therapists adjusted their roles from helping children better access their education to reducing symptoms brought about by increased stressors in their educational environment. Art therapy and relaxation techniques were utilized to maximize self-confidence as it related to a child's test anxiety (see Figure 3). Some of the strategies involved the creation of imagery depicting fears, concerns, and feelings related to the FCAT, the creation of a visual "to do list" of test-taking strategies as a means to reinforce learning, the development of personal affirmations and their related imagery, and the creation of books or journals documenting subjects, hobbies, and activities that made the student feel successful. In subsequent sessions, the students and their art therapist revisited their completed work as a way to assure themselves of their ability to successfully manage the test or any task at hand. These techniques, along with educating students about accommodations and test-taking skills, reduced the number of maladaptive incidents that occurred during the testing season.

The drop-out rate in the Miami-Dade County Public School system is one of the highest in the nation, due in large part to the steady stream of Latin American and Caribbean immigrants to Miami-Dade County. Within the population of students with emotional/behavioral disabilities the risk for dropping out of school is even higher than the general education population (National Dropout Prevention Center for Students with Disabilities, 2004). As a result, M-DCPS art therapists have incorporated drop-out prevention interventions into program development (Isis, as cited in AMS Pictures, 2008). One such tool is the designing, engineering, and implementing of drop-out prevention murals created by students at risk for dropping out of school. For example, Figure 4 depicts, in part, the story of a girl who dropped out and was lured back to school, and ultimately graduation, by a friend. This mural, in turn, became a symbol of support and success among the diverse students who created it. It has served to reinforce staying in school for many others.

Current Service Delivery Model

Art therapists in M-DCPS have maintained high professional standards while they have adjusted to the various transitions inherent in 30 years of practice within the fourth largest school system in the United States. These numerous adaptations have led the department to its

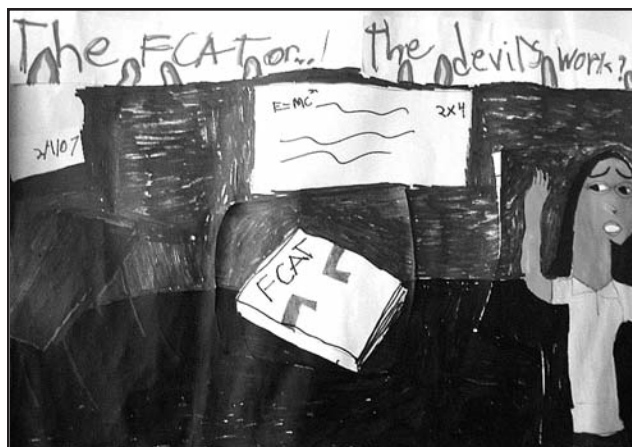


Figure 3 Artwork Depicting FCAT Anxiety



Figure 4 Drop-out Prevention Mural

present incarnation. As a condition of employment, M-DCPS requires art therapists to have earned a master's degree from an AATA-approved program, to obtain and maintain Florida teacher certification in a related field, and to have or be in the process of obtaining registration and optimally board certification. Presently, there are 19 registered and/or board certified art therapists working full time in the M-DCPS Division of Psychological Services.

The Clinical Art Therapy Department offers students with emotional/behavioral disabilities strategies to access their education by providing weekly individual and/or group sessions that focus on the students' social, emotional, behavioral, and cognitive needs. Students are referred for art therapy services by members of the treatment team, which typically includes the classroom teachers, the school clinician or counselor, and the art therapist. Each student referred for art therapy services must meet need-based criteria and be assessed before beginning art therapy. Art therapists administer the LECATA or the Silver Drawing Test (or both) based on each student's needs. Assessment results guide the development of the student's educational goals, which are integrated into the student's annual Individualized Education Plan (IEP). The IEP is a legal document that mandates the specific academic, emotional, and social goals for each student receiving special education. The student's IEP treatment team monitors and evaluates on a



Figure 5 ARTWORKS! Exhibition

quarterly basis the student's progress on meeting IEP goals. Art therapists maintain a clinical file for each student receiving services that contains determination of need, art therapy assessments, psychological reports, session notes, parent permission forms, and contact logs. In addition to providing clinical services, art therapists are required to participate in multiple professional activities including IEP treatment team planning, parent meetings, school faculty conferences, and district-wide Clinical Art Therapy Department professional development sessions.

An instructional supervisor and a department chairperson oversee the department. The instructional supervisor supports the department and ensures that programs for students with emotional/behavioral disabilities receive art therapy services. In addition to approving purchase requests for necessary program materials, the supervisor monitors and reviews the performance of art therapists by observing a clinical session and evaluating the art therapist's professional relationships with school site administrators, program staff, and students. The department chairperson coordinates art therapy service delivery, develops and monitors long- and short-term department goals, develops budget proposals, monitors expenditures, organizes and implements professional development, and provides technical support to art therapists in the field.

Growth and Inspiration

As M-DCPS faces changes in education, economy, and direction, so does the Clinical Art Therapy Department. As the department adapts to external and internal changes, a new foundation is being laid to support current and future needs. Recent budget shortfalls have prompted the department to proactively seek out

additional funding sources to supplement department and student needs. Several art therapists consistently obtain mini-grants to use with the students at their assigned school sites. During the 2008–09 school year, the department was awarded a sizable grant that was used to supplement art therapy professional development. The department's grant writing efforts will continue to expand in order to ensure and support the quality of service the department provides.

In an effort to create a greater public awareness about art therapy and how it is used in M-DCPS, student exhibitions have been taken to a new level. The Clinical Art Therapy Department has nurtured collaborative relationships with various art institutions in the community. Recently, the department embarked on a 3-year collaboration with a local university to create ARTWORKS!, a cultural support of art as a healing process (Figure 5). The aim of this joint venture is to afford students with special needs the opportunity to engage in cultural activities and experience art both as active viewers and as participants. These resourceful collaborations help the department in several ways: (a) providing access to public venues allowing for education of a broader community audience about the benefits of art therapy, (b) offering students unique opportunities to demonstrate how successful they can be when encouraged and supported, (c) connecting with the Miami-Dade County arts community on academic and cultural levels, and (d) creating new relationships and resources for the students receiving art therapy services.

The Clinical Art Therapy Department is also focusing on educating and supporting the school system through professional development. Art therapists have organized courses and presentations for mental health providers, instructional personnel, and art educators who are asking for guidance in working with inclusive classes and students with special needs. There is an increasing demand for these in-service programs, which demonstrates a growing understanding that art therapy provides insight into student behavior as well as viable strategies to use in counseling and the classroom setting.

Another avenue M-DCPS art therapists have taken beyond the school walls is a collaboration with the state chapter of the American Art Therapy Association. Many Miami-Dade County art therapists were instrumental in both establishing the state chapter and serving in leadership positions. An ongoing reciprocal relationship has proved important in the continuous effort to gain licensure for Florida art therapists. Members of the M-DCPS Clinical Art Therapy Department traveled to Tallahassee during the 2008 legislative session as part of a professional contingency and art exhibition in the capitol building. M-DCPS art therapists had the opportunity to speak with representatives and state senators regarding the benefits of art therapy, the importance of licensure, and how licensure would, in turn, allow entry for more art therapists to meet the needs of children within special education throughout the state. These ongoing efforts and the commitment of the department members are the

backbone of the long-term success of art therapy in this public school system.

Art therapists have been called upon to provide and support clinical services in new ways. The art therapist who was once seen as an adjunctive service provider has now become a primary therapist/clinician in M-DCPS. Consequently, the role of the art therapist has expanded to include case management and support for families. Many families value art therapy as a tool for self-expression and reinforcement of academic performance. Parents, teachers, and administrators are the main supporters for the art therapy program and have demanded the initiation and continuation of clinical art therapy services in the schools. As an example of the strong support received from parents who usually are unfamiliar with art therapy initially, a parent supporter wrote the following:

I would like to extend my gratitude for the art therapy services provided to my daughter during her high school years. I never heard before of art therapy, until such services were included in her IEP. I believe art therapy is an exceptional alternative to conventional counseling. Such services provide a unique rapport and interaction between the student and the art therapist. As a result of my daughter receiving art therapy, she is more focused, shows an improvement in impulse control, and has developed strategies to cope during stressful situations. I highly advocate the continuation of art therapy to support my daughter through graduation.

Conclusion

A future challenge for the M-DCPS Clinical Art Therapy Department is the need for ongoing research supporting the reliability and validity of art therapy and its impact on populations of students with special needs within the school setting. Following three decades of providing art therapy services to students with emotional/behavioral disabilities, there is the potential for a wide range of research topics. Although we have seen numerous changes, by maintaining the focus on our ultimate goal to empower students through creativity, we have become firmly woven into the fabric of special education in Miami-Dade County Public Schools. To underscore this point, Robin J. Morrison, Instructional Supervisor, affirms:

Nationally, the M-DCPS Art Therapy Department is the largest and most comprehensive service provider of clinical

art therapy to students with emotional problems in a school setting. Art therapists throughout the country have gained knowledge of the accomplishments made by this department. In summary, art therapy in Miami-Dade County, Florida, will continue to provide clinical services to students with emotional disabilities and assist the school system and the community as mental health providers. (personal communication, August 27, 2009)

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Viewpoints are short articles that present professional experiences, reflections, art works, or informed response to issues having implications for the field. A brief abstract also is now required. Submission may not exceed 2500 words including references. To have your viewpoint considered for peer review and publication, please submit online at www.arttherapyjournal.org following the instructions on the author tab of the website.