



LEWIS & CLARK GRADUATE SCHOOL OF EDUCATION AND COUNSELING

AT 530: CLINICAL ASSESSMENT BY GRAPHIC MEANS (3 credits) FALL 2018

When: Tuesdays, 1:00pm-4:30pm, September 11-December 11

Where: Rogers 220

Instructor: Mary Andrus DAT, ATR-BC, LPC, ATCS

Office hours: Thursday 10:30-12

Office location: Rogers 209

Phone: 503-768-6068

E-Mail: mandrus@lclark.edu

CATALOG DESCRIPTION

Examination and analysis of the expressive and content components of graphic imagery in relation to clients' domains of functioning and how it contributes to a deeper understanding of the clients' clinical needs when formulating a clinical assessment and treatment plan.

COURSE DESCRIPTION

Examination and analysis of art processes and products in relation to the individual's level of functioning, personality, and mental health. Evaluation of form and content of pictorial and sculptural work as they apply to the assessment process. Skills are developed in integrating evidence of developmental level, cognitive/perceptual capacities, psychodynamic processes and environmental stimuli in art work and behavior.

CAAHEP STUDENT LEARNING OUTCOMES

SLO-B - Distinguishing among the therapeutic benefits of a variety of art processes and media, strategies and interventions, and their applicability to the treatment process for individuals, groups, and families.
SLO-C - Recognize that Art Therapy, from a multicultural perspective, takes into consideration the specific values, beliefs, and actions influenced by a client's race, ethnicity, nationality, gender, religion, socioeconomic status, political views, sexual orientation, geographic region, physical capacity or disability, and historical or current experiences within the dominant culture.
SLO-D - Select culturally and developmentally appropriate assessment and evaluation methods and administer and interpret results to identify challenges, strengths, resilience, and resources for Art Therapy treatment planning.
SLO-H - Recognize clients' use of imagery, creativity, symbolism, and metaphor as a valuable means for communicating challenges and strengths and support clients' use of art-making for promoting growth and well-being.
SLO-J - Apply principles of human development, artistic and creative development, human sexuality, gender identity development, family life cycle, and psychopathology, to the assessment and treatment of clients.

CAAHEP CONTENT AREAS

Content Area	Competency Objectives	Mastery Level	Course Assessment
a.S.1, b.S.2 f.S.2, f.S.4, f.S.6; f.A.1, i.S.3, j.S.2, i.K.1, l.K.1, l.A.1	<i>Introductory Art Therapy Assessment and Treatment Planning:</i> Understand history; evidence based and clinically grounded; demonstrate how theory informs the process, have the ability to perform art therapy assessment and treatment planning; execute methods to interpret data; how to complete professional documentation required in clinical mental health settings; value cultural and developmental appropriate tools; display ethical, cultural and legal considerations; develop case conceptualization skills; understanding of graphic indicators	Introduce	Class Participation, Homework # 3, Assessment Assignment Part I, II, III, IV Case Study
c.S.3, f.K.1, h.S.1, i.S.4, j.S.4	<i>Continued Demonstration of Art Therapy and Treatment Planning:</i> understanding of therapeutic utility and psychological properties of a wide range of art processes and materials in the selection of processes and materials for delivery of art therapy services; definitions and purpose; developmental stages of artwork for all age groups; formulate treatment planning/goal setting; demonstrate the use of behavioral observations as indicators of mental disorders.	Reinforce	Class Participation, Homework #1, #2, & # 3, Assessment Assignment Part I, II, III, IV Case Study

COURSE OBJECTIVES

Upon completing this course, students will be able

1. to have a comprehensive understanding of graphic development
2. to assess functioning and developmental needs of clients
3. to demonstrate how graphic development informs treatment planning
4. to demonstrate ability to write a comprehensive art therapy assessment and treatment plan

PROFESSIONALISM IN THE CLASSROOM AND BEYOND

Clinical assessment in art therapy is the beginning stage of the therapy, and therefore, an important consideration in your training is the development of professionalism. Grading criteria includes the quality of oral, written, and interpersonal expression and the degree of responsibility and initiative demonstrated. It is important to create a positive learning environment. Please turn off cell phones and do not use laptop computers for reasons other than taking notes during class lectures if needed. Please do not eat meals in class.

Demonstrate basic listening skills; including giving your undivided attention to those speaking or presenting to the class. Demonstrate appropriate professional behavior and foster a thoughtful and respectful learning environment.

NON-DISCRIMINATION

Lewis & Clark College adheres to a nondiscriminatory policy with respect to employment, enrollment, and program. Lewis & Clark does not discriminate on the basis of actual or perceived race, color, sex, religion, age, marital status, national origin, the presence of any physical or sensory disability, veteran status, sexual orientation, gender identity, or gender expression and has a firm commitment to promote the letter and spirit of all equal opportunity and civil rights laws, including Title IX of the Education Amendments of 1972, Section 504 of the Rehabilitation Act of 1973, Title VII of the Civil Rights Act of 1964, the Age Discrimination Act, the Americans with Disabilities Act of 1990, and their implementing regulations.

DISABILITY SERVICES STATEMENT

If you have a disability that may impact your academic performance, you may request accommodations by submitting documentation to the Student Support Services Office in the Albany Quadrangle (503-768-7192). After you have submitted documentation and filled out paperwork there for the current semester requesting accommodations, staff in that office will notify me of the accommodations for which you are eligible.

TEACHING METHODS

A variety of teaching methods will be used during this course in order to achieve the above objectives. Among those methods will be assigned readings, class discussions, experiential activities, and lectures. Students will watch videos clips, engage in group learning tasks, and participate in role-play demonstrations.

REQUIRED TEXTS & READINGS:

Weekly readings are to be completed for the day indicated. Students are expected to be prepared to discuss the ideas and concepts discussed in the readings. Students are responsible for all of the assigned readings, whether or not they are discussed in class. Please note that there are more readings assigned for some topics than for others.

Required Texts

American Psychiatric Association. (2013). Diagnostic and statistical manual of mental disorders (5th edition). Washington, DC: Author.

Lukas, S. (1993). Where to start and what to ask. New York: W.W. Norton.

Required Articles and Book Chapters

Betts, D. (2013). A review of the principles for culturally appropriate art therapy assessment tools. *Art Therapy, 30*(3), 98-106.

Broecher, J. (2012). Children coping with surgery through drawings: A case study from a parenting class. *Art Therapy, 29*(1), 38-43.

Gantt, L. (2001). The formal elements art therapy scale: A measurement system for global variables in art. *Art Therapy, 18* (1) 50-55.

- Gerber, N. (1998). A developmental approach to assessment in adult art psychotherapy. *The Arts in Psychotherapy*, 7, 105 -112.
- Greece, M. (2003). Art therapy on a bone marrow transplant unit: the case study of a Vietnam veteran fighting myelofibrosis. *The Arts in Psychotherapy*, 30(4), 229-238.
- Gussack, G. Rosal, M. (2016), *Handbook of Art Therapy* (1st Edition., pp.499-606). Malden MA: Wiley Blackwell. (Multiple Chapters)
- Hanevik, H., Hestad, K. A., Lien, L., Teglbjaerg, H. S., & Danbolt, L. J. (2013). Expressive art therapy for psychosis: A multiple case study. *The Arts in Psychotherapy*, 40(3), 312-321.
- Haynes, M. J. (2008). Signs of suicide: Using road drawings with inmates on suicide observation at a county jail. *Art Therapy*, 25(2), 78-84.
- Hinz, L. D. (2015). Expressive Therapies Continuum: Use and Value Demonstrated With Case Study (Le continuum des thérapies par l'expression: étude de cas démontrant leur utilité et valeur). *Canadian Art Therapy Association Journal*, 28(1-2), 43-50.
- Huet, V. (2017). Case study of an art therapy-based group for work-related stress with hospice staff. *International Journal of Art Therapy*, 22(1), 22-34.
- Isfahani, S. N. (2008). Art therapy with a young refugee woman—survivor of war. *International Journal of Art Therapy*, 13(2), 79-87.
- Kramer, E. (2000). *Art as therapy: Collected Papers*. Chapters. 5, & 8. Philadelphia, London: Jessica Kingsley.
- Lev-Wiesel, R., & Dapna-Tekoha, S. (2000). The self-revelation through color technique: Understanding clients' relations with significant others, silent language, and defense mechanisms through the use of color. *American Journal of Art Therapy*, 39(2), 35.
- McNichols, C., Zinck, K., Witt, K. J., & Neel, J. (2016). Counselors as Agents of Change: Writing Behaviorally Stated Goals and Objectives. Ideas and Research You Can Use: VISTAS
- O'Neill, A., & Moss, H. (2015). A community art therapy group for adults with chronic pain. *Art Therapy*, 32(4), 158-167.
- Pénzes, I., van Hooren, S., Dokter, D., Smeijsters, H., & Hutschemaekers, G. (2014). Material interaction in art therapy assessment. *The Arts in Psychotherapy*, 41(5), 484-492.
- Snir, S., & Regev, D. (2013). A dialog with five art materials: Creators share their art making experiences. *The Arts in Psychotherapy*, 40(1), 94-100.
- Tucknott-Cohen, T., & Ehresman, C. (2016). Art therapy for an individual with late stage dementia: A clinical case description. *Art Therapy*, 33(1), 41-45.

Optional:

Zuckerman, E. (2010). *Clinician's Thesaurus* (7th ed). New York: Guilford Press.

CPSY DEPARTMENTAL ATTENDANCE POLICY

Class attendance is expected and required. Any missed class time will be made up by completing extra assignments designed by the instructor. Missing more than ten percent of class time may result in failure to complete the class. This would be 4.5 hours of a 45 hour class (3 credits), 3.0 hours for a 30 hour class (2 credits) or 1.5 hours for a 15 hour class (1 credit.) In case of extreme hardship and also at the discretion of the instructor, a grade of incomplete may be given for an assignment or the entire course. In such cases, the work to be submitted in order to remove the incomplete must be documented appropriately and stated deadlines met. Students are expected to be on time to class and tardiness may be seen as an absence that requires make-up work.

DISCLOSURE OF PERSONAL INFORMATION

Each student should decide for themselves what information to disclose. Students are advised to be prudent when making self-disclosures. The program cannot guarantee confidentiality of student disclosures given the group environment, although personal comments should be considered private and confidential – and remain only in the classroom – unless an exception to confidentiality applies.

CELL PHONES

Cell phones must be silenced and text messaging is not allowed during class time. If there is an emergency you may exit the class to use your cell.

CLASS PREPARATION

You must complete all assigned readings and watch any assigned video prior to attending class. This will allow us to focus on application of readings in class. Watching videos will help bring models to life, allowing you to better understand the material and ask questions.

ASSIGNMENTS AND COURSE REQUIREMENTS

Attendance and participation in all classes (5 points)

- a. Attending all classes and being on time.
- b. Giving attention to the instructor and/or other students when they are making a presentation.
- c. Demonstrating ability to recognize subtle nonverbal communication cues to assess your impact on your peers and participate in class.
- d. Demonstrating ability to be open about discussing the impact of your comments on your peers.
- e. Coming to class prepared (having read the assignment for the day and watched any assigned videos)
- f. Contributing to in-class discussion based on the topics and the readings assigned. Contributions may include how you feel about the material but merely articulating your feelings is not sufficient. You are expected to put

- those feelings in context of your thoughts and analysis of the material.
- g. Engaging in group discussions with attention and energy.
 - h. Asking questions of the instructor and/or other students regarding the material examined in class.
 - i. Providing examples to support or challenge the issues talked about in class.
 - j. Dealing with other students and/or the instructor in a respectful fashion.
 - k. Listening actively. Students will be asked questions related to the course's readings randomly in class by other students and by the instructor. Your participation in small group discussions is also required.
 - l. Adhering to all Professional Qualities. The form for evaluating Professional Qualities requirements will be distributed in class.
 - m. Making comments or giving observations about topics in the course, especially those that tie in the classroom material to "real world" problems, or try to integrate the content of the course.

Clinical assignments and exams:

Students will be working with clients/participants at practicum sites for various assignments for this class. This may involve borrowing their original artworks to photograph or for use during the completion of an assignment. Students need to inform practicum participants that they will need to use their artwork, and that it will be brought back to them once it has been photographed or the student is done using it for the assignment. For one assignment, students will work with an individual who will create several pieces of art for assessment purposes. Access to background information regarding the client's history is necessary for this assignment. Students need to discuss the above matters with their supervisor prior to beginning the assignment, in order to choose suitable participants. Participants (or guardians) from the practicum site must sign a consent form prior to completing any artwork. Confidentiality: Conceal any identifying information on artwork (names, family names, friends' names, specific places, DOB, etc). All signed releases stay on site.

Exams will be graded on the student's performance in the following areas:

The student's ability to:

- Select significant data
- Relate data across modes of assessment and treatment planning
- Read and interpret visual communication
- Present data concisely in clinical and behavioral terminology
- Identify problem areas and show clearly how those problems emerge from the assessment
- Summarize findings cohesively and concisely
- Develop goals and methods which reflect understanding of the individual, art therapy technique, and art therapy theory.

Homework # 1 (Due 9/18): Bring a piece of client artwork from a practicum, completed during a group activity (that you were present for, and observed the process). Feats scale

categories (Prominence of Color, Color Fit, Implied Energy, etc.) and their definitions as well as the Art Product Description Worksheet (distributed in class) will be applied to art observation during class. This assignment will not be graded, but **MUST** be completed to participate and continue in the course.

Homework # 2 (Due 10/2): Turn in 2 artworks (digitally) from practicum client(s) completed during a group activity. Include a 6 - 8 sentence art product description for each artwork. This should be concise and provide an overview as relevant to themes, style, content, etc. (The degree to which this is possible varies from site to site.) Please use Gantt categories and Art Product Description Worksheet (will be distributed in class) as references for completing this assignment.

Homework # 2	Possible Points
Describes the composition of the art product, the level of graphic development, and observable aspects of the art making process (behaviors and verbalizations)	2.5
Selects information that is clinically, theoretically, and culturally relevant in a way that assists in assessing the client's functioning in a variety of domains.	2.5
	5

Homework # 3 Case Study Treatment Plan. (Due 10/16): Using case study material provided (article assigned in class), write a treatment plan based on the client's art therapy experience.

Directions for Homework #3: Read case study material provided by instructor. **Follow the outline provided below.** Write two Long Term Goals (LTGs) based on the information provided by the author of the case study and for each LTG create at least one corresponding Short Term Goal (STG) that would benefit the client described in the reading. Additionally, create one LTG that *YOU* think would be important to for the client's continued treatment plan, with one corresponding STG.

Be specific. Problems must be client-based and relate to overall functioning. Long-term goals address proposed reduction of problems at the end of treatment. Long-term goals must relate to problems. Short-term goals must be measurable and observable. They describe an increment of the related long-term goal. Methods/directives must be specific, describing theme, media, behavior, verbal expression, etc. Provide a theoretically based summary of the client's individual experience of art therapy and the therapeutic focus of the approach.

What art therapy directives would you complete with this client, discuss three directives.

Directives must align with your LTGs and STGs, and support client strengths, as well as address their presenting problems. Create directives that would be appropriate for this specific client, in their specific setting. Utilize the information in the case study and art that has already been done with client to create appropriate and effective directives. Discuss rationale for directives, and theory that supports rationale. Continue to use methods and directives that are aligned with the theory that the author/clinician from the case study implemented or described. Describe the theoretical base for the approach used and why art therapy was helpful, taking into account risk factors, strengths, problems and limitations of treatment. (Support with Case Study and course material).

<p>Client Demographics and History: <i>(Relevant information gathered from reading case)</i></p>	
<p>Treatment Plan:</p>	
<p><i>Strengths /Protective Factors</i></p>	<p><i>Problems/Risk Factors</i></p>
<p><i>Treatment Parameters:</i> (individual v group; length of treatment, frequency of sessions, durations of sessions, etc)</p>	
<p><i>Treatment Goals:</i></p>	
<p>1. Long-Term Goal (derived from Case Study)</p>	
<p> 1a Short-Term Goal</p>	
<p>2. Long-term Goal (derived from Case Study)</p>	
<p> 2a Short-term goal</p>	
<p>3. Long-Term Goal (recommended by you)</p>	
<p> 3a Short Term goal</p>	
<p>Directives /Art Therapy Methods:</p>	
<p>1.</p>	
<p>2.</p>	
<p>3.</p>	

Homework # 3	Possible Points
Strengths and Problems are prioritized and correlate with the information in the article. Clinical terms are used when necessary.	2.5
Treatment parameters are played out clearly and logically - reasoning for individual, group, or family is indicated and length and frequency of treatment are noted.	2.5
Long term goals are connected to prioritized problem list and first two derived from article. Short term goals relate to long term goals and are measurable (including frequency or length and who is responsible)	2.5
Directives must align with your LTGs and STGs, and support client strengths, as well as address their presenting problems. Create directives that would be appropriate for this specific client, in their specific setting. Utilize the information in the case study and art that has already been done with client to create appropriate and effective directives. Discuss rationale for directives, and theory that supports rational.	2.5

	10
--	----

Assessment Assignment Part I - Demographics/Presenting Problems (Due 10/9): Student completes a summary paragraph of the case noting presenting problems, historical and environmental factors contributing to the case, identifying sources of information and an overview of sessions conducted or observed thus far.

Assessment Assignment Part I	Possible points
All relevant observable aspects of historical and environmental factors are explained with depth; inferences about functioning are accurate and applicable to case.	5
Summary of presenting problems, and identification of sources of information	5
	10

Assessment Assignment Part II - Art Findings/Domains/Case Summary (Due 10/23): Student identifies and understands the communicative value of visual language and is able to describe the composition of the art product, the level of graphic development, and observable aspects of the art making process (behaviors and verbalizations) in a clinically, theoretically, and culturally relevant way that assists in assessing the client's functioning in a variety of domains. The student is able to integrate findings from assessment artwork, observational data, and information from file review to assess the client's strengths and problems in four specific domains. These are described in a way that clarifies the client's strengths and problems, and indicates important cultural differences if present. The student summarizes the assessment findings in a manner that clearly communicates the primary findings based on the analysis of the visual language, content/themes, art making process, and behavior of the client. Uses art findings and observations to bolster and support domains of functioning.

Assessment Assignment Part II (Art Findings/Domain/Case Summary)	Possible points
ART FINDINGS: All components of an art finding and art analysis are identified and integrated in a coherent, cohesive, and concise manner, and free of errors.	6
PHYSICAL: An evaluation of the client's functioning in this domain includes relevant observable aspects of the art process/product; physical appearance; hygiene; body movement/coordination; verbalizations; and relevant data from supporting resources (e.g. file review, mental status exam);	2
COGNITIVE: Relevant observable aspects of the assessment artworks and processes are described; graphic development is used to assess cognitive capacity; self-concept and coping capacity are accurately assessed; cognitive assessments are referenced correctly and scoring is accurate.	2
AFFECTIVE: All relevant observable aspects of art products and process are referenced; psychological functioning is assessed and substantially supported; clear distinction made between indicators of normal vs. abnormal psychological development	2

clear distinction made between mood and affect with a specific example of this distinction provided. Graphic indicators, art process descriptors, behaviors, and verbalizations that sufficiently support inferences, Self-esteem and self-concept are documentation is integrated.	
SOCIAL: All relevant observable aspects of art products and process are referenced; Inferences about functioning are accurate; social behaviors are described and these observations are integrated with information about functioning in other settings.	2
CASE SUMMARY: The student summarizes the assessment findings in a manner that clearly communicates the primary findings based on the analysis of the visual language, content/themes, art making process, and behavior of the client. Uses historical information sparingly and only as a reference point for assessment findings.	6
	20

Assessment Assignment Part III - Case Conceptualization/Treatment Plan (Due 11/6):

The student must identify correct theoretical basis for selection of treatment approaches and case formulation. The case formulation must be tied to treatment implementation and directly related to art assessments. Student's media choices must be appropriate and support overall functioning.

The student will present a case conceptualization and planned interventions for the client. A Case Conceptualization is a process which includes: 1. An evaluation of the client's concern through observations, assessments, art, and interactions 2. Information is organized into patterns and themes that reflect the client's concerns 3. Identifies a theoretical orientation to interpret, explain, or make clinical judgments about the client's experience.

The student is to provide an overview of the treatment approach for a clearly identified time period. The student is able to clearly state the client's strengths and problems, and identify protective and risk factors. The problems list is prioritized with the most clinically salient or concerning problem listed first. The student is able to write treatment goals with measurable Long-Term and Short-Term Goals, that are based on assessment findings, and prioritized problems list.

The student constructs art therapy directives and selects material/media, that relate to the client's problems, utilize the client's strengths, and are derived from the art processes and products observed in the assessment session(s), are developmentally appropriate, and relate to treatment goals. Theme and media selection is theoretically, clinically and culturally informed.

Assessment Assignment Part III	Possible points
---------------------------------------	------------------------

Case Conceptualization: Presents case in a clear, well-thought out manner. Utilizes clinical language. Systematically integrates available information to develop a clear, clinically sound representation of case. Clear treatment focus.	5
Risk and Protective Factors/Clinically Relevant Problem List: The student is able to clearly state the client's strengths and problems, and identify protective and risk factors. The problems list is prioritized with the most clinically salient or concerning problem listed first.	5
Treatment Plan (Parameters & Objectives/Goals): The student provides an overview of the treatment approach for a clearly identified time period. The student is able to write treatment goals with measurable long-term (LTG) and short-term goals (STG), that are based on assessment findings, and prioritized problems list. STGs are directly related with incremental steps toward LTGs.	5
Art Therapy Directives/Methods: The student constructs art therapy directives and selects material/media, that relate to the client's problems, utilize the client's strengths, and are derived from the art processes and products observed in the assessment session(s), are developmentally appropriate, and relate to treatment goals. Theme and media selection is theoretically, clinically and culturally informed.	5
	20

Assessment Assignment Part IV - Final Oral Presentations (DUE 11/27 & 12/4): Oral Presentations of Comprehensive Assessment: In-class presentation of completed comprehensive assessments.

Assessment Assignment Part IV	Possible points
Student is able to distinguish among the therapeutic benefits of a variety of art processes and media, strategies and interventions, and their applicability to the treatment process for individuals, groups, and families. (SOL B)	4
Student able to recognize art therapy processes, from a multicultural perspective, takes into consideration the specific values, beliefs, and actions influenced by a client's race, ethnicity, nationality, gender, religion, socioeconomic status, political views, sexual orientation, geographic region, physical capacity or disability, and historical or current experiences within the dominant culture. (SOL C)	4
Student demonstrates ability to select culturally and developmentally appropriate assessment and evaluation methods and administer and interpret results to identify challenges, strengths, resilience, and resources for Art Therapy treatment planning. (SOL D)	4
Student is able to recognize clients' use of imagery, creativity, symbolism, and metaphor as a valuable means for communicating challenges and strengths and support clients' use of art-making for promoting growth and well-being. (SOL H)	4
Student applies principles of human development, artistic and creative development, human sexuality, gender identity development, family life cycle, and psychopathology, to the assessment and treatment of clients. (SOL J)	4
	20

Case Study Comprehensive Assessment (Due 11/20): consists of a case for which an assessment report outline is provided. Students use the outline to write a complete assessment/treatment plan report, using a structured outline that is provided at the time of

the exam. In addition, students answer questions pertaining to theoretical exploration of client functioning and theoretical basis for treatment design.

Case Study Comprehensive Assessment	Possible Points
Domains of Functioning: The student is able to integrate findings from assessment artwork, observational data, and information from file review to assess the client's strengths and problems in four specific domains. These are described in a way that clarifies the client's strengths and problems, and indicates important cultural differences if present.	2
Case Summary: The student summarizes the assessment findings in a manner that clearly communicates the primary findings based on the analysis of the visual language, content/themes, art making process, and behavior of the client. Uses historical information sparingly and only as a reference point for assessment findings.	2
Case Conceptualization: Presents case in a clear, well-thought out manner. Utilizes clinical language. Systematically integrates available information to develop a clear, clinically sound representation of case. Clear treatment focus.	2
Treatment Plan (Parameters & Objectives/Goals): The student provides an overview of the treatment approach for a clearly identified time period. The student is able to write treatment goals with measurable long-term(LTG) and short-term goals(STG), that are based on assessment findings, and prioritized problems list. STGs are directly related with incremental steps toward LTGs.	2
Art Therapy Directives/Methods: The student constructs art therapy directives and selects material/media, that relate to the client's problems, utilize the client's strengths, and are derived from the art processes and products observed in the assessment session(s), are developmentally appropriate, and relate to treatment goals. Theme and media selection is theoretically, clinically and culturally informed.	2
	10

EVALUATION AND GRADING

Because of the skill development nature of this course, it is required that students complete all assignments to pass this class.

Assignment	Point Value
Class Participation	5
Homework #1	-
Homework #2 (Art Product Description)	5
Homework #3 (Case Study Treatment Plan)	10
Assessment Assignment Part I (Demographics/Presenting Problems)	10
Assessment Assignment Part II (Art Findings/Domains/Case Summary)	20
Assessment Assignment Part III (Case Conceptualization/Treatment Plan)	20

Case Study Comprehensive Assessment	10
Assessment Assignment Part IV (Final Oral Presentations)	20
Total Points in the Course:	100 points

FINAL GRADING

A = 94-100%	B = 83-87%	C = 73-77%
A- = 90-93%	B- = 80-82%	C- = 70-72%
B+ = 88-89%	C+ = 78-79%	

NOTE: All assignments must be turned on time. Five points will be deducted for each day an assignment is late.

COURSE OUTLINE

Class Date	Topic	Readings & Assignments Due
Week 1: 9/11	Welcome, Review of Syllabus	
Week 2: 9/18	Assessment: The first stage of treatment Observations and Art Findings	Homework #1 DUE <i>Readings:</i> Kramer Chapters: 5 & 8 Pénzes, I., van Hooren, S., Dokter, D., Smeijsters, H., & Hutschemaekers, G. (2014). Material interaction in art therapy assessment. <i>The Arts in Psychotherapy</i> , 41(5), 484-492. Snir, S., & Regev, D. (2013). A dialog with five art materials: Creators share their art making experiences. <i>The Arts in Psychotherapy</i> , 40(1), 94-100. Gantt, L. (2001). The formal elements art therapy scale: A measurement system for global variables in art. <i>Art Therapy Journal of the American Art Therapy Association</i> . 18 (1) 50-55.
Week 3: 9/25	Assessment & Observations and Art Findings	<i>Readings:</i> Wiley Chapters: 48, 49, 50, 52, 53 Haynes, M. J. (2008). Signs of suicide: Using road drawings with inmates on suicide observation at a county jail. <i>Art Therapy: Journal of the American Art Therapy Association</i> . 25(2), 78-84. Betts, D. (2013). A review of the principles for culturally appropriate art therapy assessment tools. <i>Art Therapy: Journal of the American Art Therapy Association</i> . 30(3), 98-106.
Week 4: 10/2	Gathering Information	Homework #2 DUE <i>Readings:</i> Lukas, Chapters 1-7

		Lev-Wiesel, R., & Dapna-Tekoha, S. (2000). The self-revelation through color technique: Understanding clients' relations with significant others, silent language, and defense mechanisms through the use of color. <i>American Journal of Art Therapy</i> , 39(2), 35.
Week 5: 10/9	Domains of Functioning	Assessment Assignment Part I DUE <i>Readings:</i> Lukas, Chapters 8-11
Week 6: 10/16	Treatment Planning: Parameters & Goals	Homework # 3 DUE <i>Reading:</i> McNichols, C., Zinck, K., Witt, K. J., & Neel, J. (2016). Counselors as Agents of Change: Writing Behaviorally Stated Goals and Objectives. <i>Ideas and Research You Can Use: VISTAS</i> Selected Case Study (assignment: Homework #3): Greece, M. (2003). Art therapy on a bone marrow transplant unit: the case study of a Vietnam veteran fighting myelofibrosis. <i>The Arts in Psychotherapy</i> , 30(4), 229-238.
Week 7: 10/23	Treatment Planning: Goals	Assessment Assignment Part II DUE <i>Reading:</i> As assigned
Week 8: 10/30	Case Study Practice	<i>Reading:</i> Broecker, J. (2012). Children coping with surgery through drawings: A case study from a parenting class. <i>Art Therapy</i> , 29(1), 38-43. Hanevik, H., Hestad, K. A., Lien, L., Teglbaerg, H. S., & Danbolt, L. J. (2013). Expressive art therapy for psychosis: A multiple case study. <i>The Arts in Psychotherapy</i> , 40(3), 312-321.
Week 9: 11/6	Case Study Practice	Assessment Assignment Part III DUE <i>Reading:</i> Tucknott-Cohen, T., & Ehresman, C. (2016). Art therapy for an individual with late stage dementia: A clinical case description. <i>Art Therapy</i> , 33(1), 41-45. O'Neill, A., & Moss, H. (2015). A community art therapy group for adults with chronic pain. <i>Art Therapy</i> , 32(4), 158-167.
Week 10: 11/13	Case Study Practice	<i>Reading:</i> Huet, V. (2017). Case study of an art therapy-based group for work-related stress with hospice staff. <i>International Journal of Art Therapy</i> , 22(1), 22-34. Isfahani, S. N. (2008). Art therapy with a young refugee woman—survivor of war. <i>International Journal of Art Therapy</i> , 13(2), 79-87.

		Hinz, L. D. (2015). Expressive Therapies Continuum: Use and Value Demonstrated with Case Study (Le continuum des thérapies par l'expression: étude de cas démontrant leur utilité et valeur). <i>Canadian Art Therapy Association Journal</i> , 28 (1-2), 43-50.
Week 11: 11/20	In-Class : Case Study Comprehensive Assessment	Case Study Comprehensive Assessment IN-CLASS
Week 12: 11/27	Final Oral Presentations	Assessment Assignment Part IV DUE <i>Reading:</i> As assigned
Week 13: 12/4	Final Oral Presentations	Assessment Assignment Part IV DUE <i>Reading:</i> As assigned
Week 14: 12/11	Review, Closing, Evaluations Art Experiential	