

Graduate Outcomes and Core Competencies for Masters level Creative Arts Therapy Graduates

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Acknowledgements

This report is the result of an 8 month project conducted in 2023. It was auspiced by the Australian, New Zealand and Asian Creative Arts Therapies Association (ANZACATA). The research was overseen by **Dr Kate Dempsey**, CEO of ANZACATA and conducted by **Dr Henry Bowen**, Senior Research Officer, Military & Emergency Services Health Australia.

ANZACATA is the peak professional body that represents Creative Arts Therapists in Australia, New Zealand and the Asia/Pacific region. It is a member-run self-regulating non-profit company limited by guarantee.

The primary objective of this project was to develop specific and measurable professional standards and core competencies to detail graduate outcomes for practising Creative Arts Therapy (CAT) members of ANZACATA and the universities which offer Masters level courses specifically in Creative Arts Therapy.

This is the first time internationally that professional standards and core competencies for Masters level CAT graduates have been developed.

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Project Rationale

The Australian, New Zealand and Asian Creative Arts Therapies Association (ANZACATA) is the peak professional body that represents Creative Arts Therapists in Australia, New Zealand and the Asia/Pacific region. It is a member-run self-regulating non-profit company limited by guarantee. ANZACATA has been responsible for supporting, serving and advocating for its members and to uphold and enhance industry standards and professionalism since 1987 (ANZACATA, 2022).¹

The Project summarised in this report was Stage One of a wider review of the existing Course Approval document and process that ANZACATA has used to accept graduates and approve courses specifically for Creative Arts Therapy that are offered at Masters level by 10 universities in the Australasia region.

In order to review course structures and graduate outcomes, ANZACATA determined that it first needed to develop a set of professional standards and core competencies that graduates should have in order to practice competently and ethically in their chosen profession. This set of competencies and professional standards could then be used to measure the performance of each university course currently accepted by ANZACATA for membership of its graduates.

¹ ANZACATA (2022). About ANZACATA. URL: <https://www.anzacata.org/About-ANZACATA>

Project Summary

Firstly, ANZACATA initiated preliminary work core to this project. This work included:

- Gathering data from universities on any missing information on courses, units, subjects, qualification of teachers, how the practicum hours are spent;
- Preparing a document on graduate outcomes /core competencies of graduates as they are currently reported by educational providers;
- Identifying key stakeholders including national and international Creative Arts Therapy practitioners and researchers, universities, and international accreditation bodies.

Following this preliminary work, ANZACATA contracted with MESHA to employ Dr Henry Bowen to undertake consultation with Creative Arts Therapy experts and the 10 universities which seek ANZACATA membership for their graduates, regarding the draft professional standards and core competencies.

ANZACATA believed it was vitally important to work closely with the universities and also with an international panel of experts on defining the work undertaken by professionally trained Creative Arts Therapists. ANZACATA determined that an e-Delphi process was ideal to gather views and consolidate acceptance/agreement with the draft core competencies.

Twenty-five (25) individuals comprising international Creative Arts Therapy practitioners and researchers, university staff, and international accreditation bodies were invited to participate in the e-Delphi survey to contribute to developing specific and measurable core competencies/graduate outcomes and to build a database which will lead to a Scope of Practice document.

The Delphi method is a process used to arrive at group consensus or decision by surveying a panel of experts (de Meyrick, 2003)². Experts respond to several rounds of questions, and the responses are aggregated and shared with the group after each round. Views are gathered anonymously, so that all views have the same weight in the process. An e-Delphi process occurs online and this process is described in detail in this report. The process was conducted asynchronously - meaning interaction occurred without real-time conversation.

The Project undertook 3 rounds of the e-Delphi process, with changes made to the draft core competencies and professional standards at each iteration, following advice from those consulted.

There was a high level of agreement after three rounds of the e-Delphi process with the final wording of the standards and competencies. This is the first time an international panel has developed such clear standards and competencies in the field of Creative Arts Therapy.

² de Meyrick, J. (2003). The Delphi method and health research. *Health Education*, 103(1), 7-16.

Professional Standards and Core Competencies for Creative Arts Therapists



Core Competencies for Creative Arts Therapists

CORE COMPETENCY NUMBER	CORE COMPETENCY STATEMENT
CC1	Collaboratively establish goals and objectives for creative arts therapy sessions in consultation with clients (including individuals, family or groups) where appropriate to improve physical, mental and emotional well-being
CC2	Collaboratively select appropriate practice approaches and/or methods for the needs of the particular client where appropriate
CC3	Demonstrate proficiency in the arts-based modalities relevant to the therapist's area of training
CC4	Co-design therapy plans which are culturally appropriate and sensitive to the diversity and experience of clients/service users as appropriate
CC5	Understand, interpret, analyse, and appropriately critique theory in the disciplines of creative arts therapy and counselling/psychotherapy and communicate these in written and oral formats
CC6	Assist clients in the use of creative expression within the capacity of the therapist's area of training and the capacity of the client
CC7	Integrate arts-based therapeutic knowledge, techniques and understandings when reflecting with clients on the creative work produced during their therapy sessions
CC8	Write case notes and progress reports that are consistent with professional, organisational and legislative requirements, incorporating appropriate arts-based examples where required
CC9	Review and update therapy plans in collaboration with the client based on their progress and feedback where appropriate
CC10	Assess a situation, determine the nature and severity of the problem, and call upon the required knowledge and experience to deal with the problem (or refer), in collaboration with the client where appropriate
CC11	Demonstrate awareness of the limits of creative arts therapy practice and counselling/psychotherapy and assess the limits of their own scope of practice by seeking advice and making referrals to other professionals and services
CC12	Observe all government legislation, ethical guidelines and standards of practice regarding: <ul style="list-style-type: none">• Safety• Informed consent• Confidentiality• Reporting child and elder abuse• Family and domestic violence• Mental health• Guardianship• Anti-discrimination And seek appropriate supervision and guidance if specific situations are unclear
CC13	Commit to ethical practice by engaging in regular supervision and participating in at least 25 hours of professional development activities annually (regardless of client numbers)
CC14	Demonstrate the capacity to identify, examine and reflect on personal biases by engaging in ongoing professional development around cultural foundations and their influence on personal biases that may impact working with a diverse range of individuals, including but not limited to, First Nations people, people living with disabilities, LGBTQIA+ individuals, and cases of complexity
CC15	Articulate thoughts and express ideas effectively using oral, written, visual and non-verbal communication skills with a range of individuals and teams including clients, health care professionals, and funding/insuring bodies

Background



Creative Arts Therapists are mental health professionals who use art, media and the creative process (drawing, writing, sculpting, drama, clay, sand, dance and movement) to facilitate the exploration of feelings and improve self-awareness as a psychotherapeutic intervention (Malchiodi, 2018)³.

The profession has been well established and recognised in many countries such as the UK, the USA and across Europe since the 1940s. Creative Arts Therapy (CAT) has been recognised and regulated around the world by organisations such as the Health and Care Professions Council (HCPC) in the UK and the American Art Therapy Association.

As an emergent profession in Australia, New Zealand and Asia, the profession gained classification by the Australian and New Zealand Classification of Occupations in 2007. Since then, the profession and its diversity has grown exponentially, due in part to the increase in evidence and practice-based research in the field and the greater profile of the benefits of the arts in health (ANZACATA, 2022)⁴.

However, despite international growth and recognition of the benefits to health of Creative Arts Therapy, this therapeutic group is an unregulated mental health profession in Australia, New Zealand and Asia. This means the title of “Creative Arts Therapist” is unprotected by policy and legislation (Loomes & Bowen, 2022)⁵. Anyone with any amount of training can call themselves a Creative Arts Therapist and provide services. While many have higher education degrees (for example, Master of Art Therapy), this is not always the case.

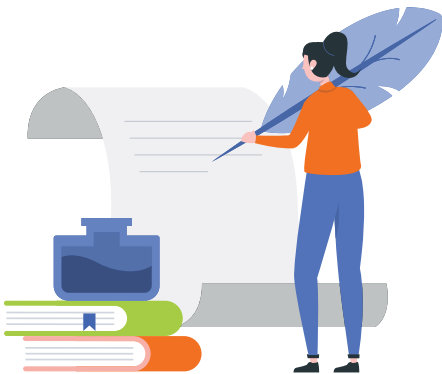
In the absence of government regulation and title protection, ANZACATA is the self-regulating body for qualified Creative Arts Therapists. It approves the Masters courses in Creative Arts Therapy for 10 universities in Australia, New Zealand and in Hong Kong and Singapore and registers their graduates. Registration with ANZACATA requires at least post graduate study in art therapy. Ongoing supervision and continuing professional development are also necessary following graduation and commencement in the workforce. While this provides a sound guide for CATs in the region, improvements could be made to this system.

A starting place for these improvements is with gaining a better understanding of Masters level graduates. Westwood (2013)⁶ demonstrated that there were fundamental differences in the development of the CAT Masters training courses in Australia, resulting in varying practice principles among practitioners. As such, there is a need to better regulate the expectations of graduates in Masters level courses. However, internationally there are no standardised, specific, and measurable professional standards or core graduate competencies for Masters level CAT graduates.

³ Malchiodi, C. A. (2018). Creative arts therapies and arts-based research. *Handbook of arts-based research*, 68-87.
⁴ ANZACATA (2022). About ANZACATA. <https://www.anzacata.org/About-ANZACATA>
⁵ Loomes & Bowen (2022). For art therapy to flourish, better regulation and protections are required. *Croaky Health Media*. URL: <https://www.croakey.org/for-art-therapy-to-flourish-better-regulation-and-protections-are-required/>
⁶ Westwood, J. (2013). Hybrid Creatures: Mapping the emerging shape of art therapy education in Australia, including reflections on New Zealand and Singapore. *Australia and New Zealand Journal of Art Therapy*, 1-15.

Project Objectives

The primary objective of this project was to develop specific and measurable professional standards and core competencies to detail graduate outcomes at Masters degree level for ANZACATA practising members and for the universities whose courses ANZACATA approves.



Methodology

This project utilised an e-Delphi process for commenting on the current standards of graduate outcomes in order to eventually create a new Course Approval document and develop a Scope of Practice document.

DETERMINING THE EXPERT PANEL FOR E-DELPHI PROCESS

A full panel of experts was invited to partake in this process. The panel included all the current university contacts in the Australian, New Zealand, and Asia region, but also experienced arts therapy clinicians, experts in the field from UK and North America, employers, government representatives and clients to ensure that we gathered consensus on what a competent Creative Arts Therapy clinician must be able to do in the workplace to be successful (and therefore what universities must teach so that ANZACATA can accept their graduates).

The invited expert panel comprised of 25 experts and included:

- 10 x course co-ordinators (all our currently approved courses were invited)
- 3 x employers of Creative Arts Therapists (public, community and private sector)
- 5 x experienced clinician members of ANZACATA, representing different modalities, locations and workplace types (invited by ANZACATA)
- 3 international experts (UK, USA and Canada) drawn from sister associations
- 2 x clients (or past clients) of existing ANZACATA professional members
- 2 x Government bodies that employ our members (drawn from NDIA and ACC)

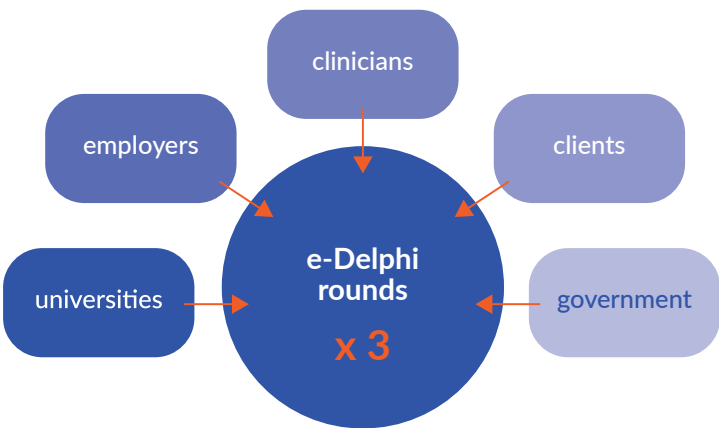


Figure 1: Contributions of the expert panel to the e-Delphi rounds

DEVELOPMENT OF THE INITIAL EXPLORATORY QUESTIONNAIRE:

Based on the data provided from universities on any missing information on courses, units, subjects, qualification of teachers, how the practicum hours are spent, ANZACATA prepared a document on graduate outcomes/core competencies of graduates as they are currently reported by educational providers. This consisted of three main areas within the scope of practice of a qualified Creative Arts Therapist for Professional Standards. Additionally, there were thirteen threshold competencies that ANZACATA considers necessary for members to practise safely and ethically. They set out what a graduating student must know, understand and be able to do by the time they have completed their training and become a practising member of ANZACATA.

As a part of the e-Delphi process, the Professional Standards gained an additional standard: 'Cultural and Diversity Responsiveness' and the existing draft 13 core competencies grew to include 15 competencies.

PROFESSIONAL STANDARDS
Knowledge of Mental Health Interventions
Application of Creative Arts Methods and Techniques
Ethical Practice
Cultural and Diversity Responsiveness (added)

Delphi participants were asked to consider on a scale of 1 to 10 how much they **agree**⁷ with each of the professional standards and core competencies (with 1 being "not at all" and 10 being "completely agree") and how **relevant**⁸ they believe each of these professional standards and core competencies are for Creative Arts Therapists (with 1 being "not at all" and 10 being "completely relevant").

Participants were also asked to provide any commentary they may have for each standard and competency. Participants were not required to leave a comment if they did not have one to make but were free to elaborate on their scoring and make suggestions for each item.

Finally, e-Delphi participants were given the opportunity to provide open-ended responses to questions asking if there was anything else they'd like to tell us about core competencies/graduate outcomes, professional standards, or Scope of Practice.

A draft version of this questionnaire was reviewed by the ANZACATA CEO and minor adjustments to the format and delivery were made prior to distribution to the participants. Participants were given 3 weeks to respond to the e-Delphi, with two reminders to complete sent throughout that period.

DEVELOPMENT OF SECONDARY QUESTIONNAIRE:

Based on participant responses to the first questionnaire, a second questionnaire was developed. This included modified versions of the existing items based on the agreement and relevancy reported in round one, and 1 x additional standard and 2 x competencies based on suggestions from the expert panel. This questionnaire followed the same procedure as the previous questionnaire.

DEVELOPMENT OF FINAL QUESTIONNAIRE:

Based on participant responses to the second questionnaire, a third and final questionnaire was developed. Within this questionnaire, participants were provided with the wording of a near final list of professional standards and core competencies and asked to review the final prospective professional standards and core competencies, with a new element called 'important considerations' now added, and to offer feedback only where they believe it is relevant.

⁷ Agree was defined as believing that the standard/competency is appropriately written as is (the phrasing/wording/style is appropriate)

⁸ Relevant was defined as believing that standard/competency is appropriate as a standard/competency(the concept is relevant to practice and connected to what you expect a graduate to display).

Participants reviewed the professional standards and core competencies as a whole and were asked if they had any final comments regarding any of the professional standards with a 'yes/no' response. Participants were informed that the professional standards and core competencies had previous changes incorporated and received a high level of agreement by the e-Delphi participants through earlier rounds.

Comments were not required and selecting "no" indicated they had no major concerns and that they would move on to the next stage, indicating they approved of the professional standards and core competencies, respectively. However, if they wished to make a comment they could click "yes" and provide a comment on any of the professional standards or core competencies individually.

Finally, participants were given one last opportunity to provide open-ended responses to questions asking if there was anything else they'd like to tell us about core competencies/graduate outcomes, professional standards, or Scope of Practice.

A draft version of this questionnaire was reviewed by the ANZACATA CEO and minor adjustments to the format were made prior to distribution to the participants. Participants were given 2 weeks to respond to the e-Delphi, with two reminders to complete sent throughout that period.



FINALISATION OF PROFESSIONAL STANDARD AND CORE COMPETENCIES:

At the end of Round 3 of the e-Delphi, all remaining feedback was incorporated into the professional standards and core competencies, the finalised versions of the Professional Standards and Core Competencies were supplied to the ANZACATA CEO for review. These standards and competencies were then reported to the ANZACATA Board of Directors and developed in a two-page final document to be supplied to the e-Delphi expert panel, ANZACATA board, and the universities (and re-produced here).

What the experts told us

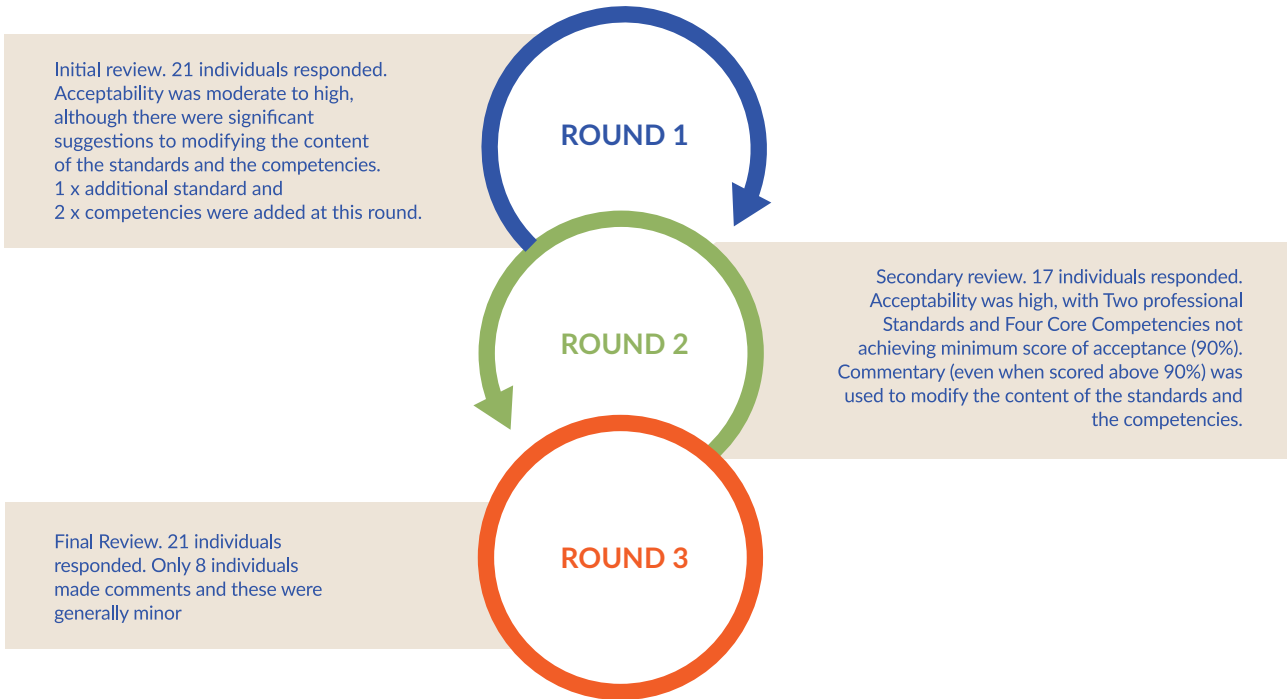


Figure 2: e-Delphi Round summary

Round One

Of the 24 invited individuals, 21 completed the e-Delphi; one withdrew from participation due to workload commitments and two were non-respondents. For the professional standards, the average participant score and overall percentage of acceptance as ratings for agreement and relevance are outlined below in Table 1.

TABLE 1: AVERAGE SCORES AND RATINGS FOR AGREEMENT AND RELEVANCE FOR THE PROFESSIONAL STANDARDS						
	Agreement Knowledge	Agreement Application	Agreement Ethics	Relevance Knowledge	Relevance Application	Relevance Ethics
Average Score	7.7	8.9	9.0	8.4	9.4	9.5
% High Acceptability	36.4%	59.1%	72.7%	50.0%	81.8%	81.8%
% Mod Acceptability	45%	32%	18%	36%	9%	9%
% Low Acceptability	14%	5%	5%	9%	5%	5%



Overall, e-Delphi members noted:

- issues around the use of the language 'high-level' understanding;
- that trauma-informed or trauma-focused was missing from the approaches;
- that other approaches specific to arts therapies were missing (e.g. narrative);
- concern that this generates a separation between "art" and "therapy" (reducing art to secondary in this consideration) by focusing on other mental health "interventions";
- caution around the implication that visual art therapists would need comprehensive knowledge of dance, drama, music therapies considering ANZACATA is multi-profession;

- specifically noted the use of the word 'studio' as being more implicitly visual arts;
- lack of inclusion around cultural and social understanding;
- comments around personal attributes and responsibilities also noted as lacking.

For the core competencies, the average participant score and overall percentage of acceptance as the ratings for agreement are outlined below in Table 2, and the ratings for relevance are outlined below in Table 3.

TABLE 2: AVERAGE SCORES AND RATINGS FOR AGREEMENT FOR THE CORE COMPETENCIES				
	Average Score	% High Acceptability	% Mod Acceptability	% Low Acceptability
CC1	9.6	86.40%	4.50%	4.50%
CC2	9.3	72.70%	22.70%	0.00%
CC3	8.8	54.50%	40.90%	0.00%
CC4	9.3	81.80%	9.10%	4.50%
CC5	9	72.70%	22.70%	0.00%
CC6	8.5	59.10%	31.80%	4.50%
CC7	9.2	77.30%	18.20%	0.00%
CC8	9.6	86.40%	9.10%	0.00%
CC9	9.4	77.30%	18.20%	0.00%
CC10	9.3	77.30%	18.20%	0.00%
CC11	9.6	86.40%	9.10%	0.00%
CC12	9.8	90.90%	4.50%	0.00%
CC13	9.2	81.80%	9.10%	4.50%

TABLE 3: AVERAGE SCORES AND RATINGS FOR RELEVANCE FOR THE CORE COMPETENCIES				
	Average Score	% High Acceptability	% Mod Acceptability	% Low Acceptability
CC1	9.5	81.80%	13.60%	0.00%
CC2	9.1	72.70%	22.70%	0.00%
CC3	8.8	54.50%	40.90%	0.00%
CC4	9.5	81.80%	13.60%	0.00%
CC5	8.6	63.60%	22.70%	9.10%
CC6	9	68.20%	27.30%	0.00%
CC7	9.2	77.30%	18.20%	0.00%
CC8	9.5	86.40%	9.10%	0.00%
CC9	9.4	81.80%	13.60%	0.00%
CC10	9.4	81.80%	13.60%	0.00%
CC11	9.6	90.90%	4.50%	0.00%
CC12	9.9	90.90%	4.50%	0.00%
CC13	9.2	72.70%	22.70%	0.00%

For core competencies, e-Delphi members noted:

- current phrasing of some competencies may imply power hierarchy and emphasis should be on collaboration;
 - that some competencies may be more appropriate for behavioral approaches and not others;
 - issues around the use of the word 'intervention';
 - allow phrasing to incorporate individuals who are not multimodal;
 - some competencies may be more academically important than clinically;
- language in some competencies could be considered patronising;
 - consider the visual elements of the case notes;
 - modification may imply changing previous plans, rather than noting changes over time;
 - referral out of the service is not always possible in multi-discipline practices;
 - new graduates may not have skill in some competencies but will be working toward building it;

- it would be helpful elsewhere to define what counts as supervision;
- questions around the required hours of supervision, and if the 25hrs of PD can include supervision;
- flagging around cost of PD and questions around how 25hrs was decided upon;
- multiple suggestions for a ratio of PD hours to client/clinical hours rather than a set number;
- queries around processes when a CAT takes a break in practice;
- lack of competency that specifically connects to cultural safety;
- lack of competency that specifically connects to communication & interdisciplinary/interprofessional practice.



Round Two

Of the 23 invited individuals, 17 completed the second round of the e-Delphi; six were non-respondents. The results outline the responses from the 17 individuals who completed the survey. Non-respondents at this round included 3 x Course Co-ordinators (2 x Aus, 1 x NZ); 2 x International experts (US & Canada); 1 x Art Therapy client; 1 x Employer.

For the professional standards and core competencies, the average participant score and overall percentage of acceptance as the ratings for agreement and relevance are outlined below in Table 6 and Table 7 respectively. Additionally, the overall acceptability change between round 1 and round 2 of the e-Delphi was recorded in these tables.

TABLE 6: AVERAGE PARTICIPANT SCORE AND OVERALL PERCENTAGE OF ACCEPTANCE AS THE RATINGS FOR AGREEMENT AND RELEVANCE FOR PROFESSIONAL STANDARDS

Standard	Average Score	% High Acceptability	% Mod Acceptability	% Low Acceptability	Acceptability Chg
Agreement Knowledge	8.3	52.90%	35%	12%	0.6+
Agreement Application	8.2	58.80%	29%	12%	0.7-
Agreement Ethics	9.5	94.10%	6%	0%	0.5+
Agreement Culture	9.5	88.20%	6%	6%	NA
Relevance Knowledge	8.9	64.70%	29%	6%	0.5+
Relevance Application	8.9	70.60%	24%	6%	0.5-
Relevance Ethical	9.5	88.20%	12%	0%	0.1+
Relevance Culture	9.4	52.90%	35%	12%	N/A

For professional standards, e-delphi members noted:

- concern that standards 1 and 2 would be too high of an expectation for new graduates;
- that practitioners tend to specialise in one area and will have a comprehensive understanding of that area over others;
- that standard 1 and 2 implies a 'separation' between the 'art' and the 'therapy', reducing the art part to a secondary consideration, a 'technique' without its own 'body of knowledge'.

TABLE 7: AVERAGE PARTICIPANT SCORE AND OVERALL PERCENTAGE OF ACCEPTANCE AS THE RATINGS FOR AGREEMENT AND RELEVANCE FOR CORE COMPETENCIES					
Competency	Average Score	% High Acceptability	% Mod Acceptability	% Low Acceptability	Acceptability Chg
Agreement Comp 1	9.4	76.50%	23.50%	0.00%	-0.1
Agreement Comp 2	9.5	82.40%	17.60%	0.00%	0.4
Agreement Comp 3	9.1	64.70%	35.30%	0.00%	0.3
Agreement Comp 4	9.5	82.40%	17.60%	0.00%	0
Agreement Comp 5	9	70.60%	29.40%	0.00%	0.4
Agreement Comp 6	9.3	76.50%	23.50%	0.00%	0.3
Agreement Comp 7	8.6	58.80%	29.40%	11.80%	-0.6
Agreement Comp 8	8.9	64.70%	29.40%	5.90%	-0.6
Agreement Comp 9	9.5	88.20%	11.80%	0.00%	0.1
Agreement Comp 10	9.4	88.20%	11.80%	0.00%	0
Agreement Comp 11	9.3	76.50%	23.50%	0.00%	-0.3
Agreement Comp 12	9.6	82.40%	17.60%	0.00%	-0.3
Agreement Comp 13	9.2	70.60%	29.40%	0.00%	0.1
Agreement Comp 14	9.4	76.50%	23.50%	0.00%	NA
Agreement Comp 15	9.5	88.20%	11.80%	0.00%	NA
Relevance Comp 1	9.3	76.50%	17.60%	5.90%	-0.2
Relevance Comp 2	9.4	76.50%	17.60%	5.90%	0.3
Relevance Comp 3	9.1	58.80%	41.20%	0.00%	0.3
Relevance Comp 4	9.4	76.50%	23.50%	0.00%	-0.1
Relevance Comp 5	8.9	70.60%	23.50%	5.90%	0.3
Relevance Comp 6	9.4	76.50%	23.50%	0.00%	0.4
Relevance Comp 7	8.6	64.70%	23.50%	11.80%	-0.6
Relevance Comp 8	8.8	64.70%	23.50%	11.80%	-0.7
Relevance Comp 9	9.2	76.50%	17.60%	5.90%	-0.2
Relevance Comp 10	8.9	70.60%	23.50%	5.90%	-0.5
Relevance Comp 11	9.3	82.40%	11.80%	5.90%	-0.3
Relevance Comp 12	9.5	82.40%	17.60%	0.00%	-0.4
Relevance Comp 13	9.3	76.50%	23.50%	0.00%	0.2
Relevance Comp 14	9.2	82.40%	11.80%	5.90%	NA
Relevance Comp 15	9.4	82.40%	17.60%	0.00%	NA

For Core Competencies, e-Delphi members noted:

- some competencies may not always be appropriate and suggested adding ‘where appropriate’.
- we may need to consider digital arts in the future;
- like to see Creative Arts Therapy come first;
- communication is the key aspect for CC5;
- concern that CC6 may be restrictive as sometimes challenging beyond the ‘preferred forms’ of client expression is required;
- concern that CC7 may be restrictive as it implies a psychotherapeutic approach which excludes other, non-westernized modalities (E.g., those employed in First Nations settings);
- for CC8 personal case notes may include imagery, but every other place where a report is required does NOT want imagery;
- concern that CC10 would be too high of an expectation for new graduates;
- concern that the language around what a ‘professional situation’ may entail for CC10;
- like to see selfcare added;
- in CC12, legislations and guidelines can often have contradictions or challenges when these categories overlap, suggested adding a line acknowledging this;
- in CC14, language of ontology and axiology may be too complex.

In round 2, standards and competencies were required to achieve a minimum score of nine out of ten (9/10) on both Agreement and Relevance to be accepted. Two professional Standards and Four Core Competencies did not achieve this minimum score.

STANDARDS MODIFIED FOR ROUND 3:

- **Knowledge of Mental Health Approaches**
- Agreement or Relevance: Both
- **Application of Creative Arts Methods and Techniques**
- Agreement or Relevance: Both

COMPETENCIES MODIFIED FOR ROUND 3:

- **CC5:** Analyse and critique theory in the disciplines of counselling/psychotherapy and creative arts therapy and communicate these in written and oral formats.
- Agreement or Relevance: Relevance
- **CC7:** Integrate psychotherapeutic knowledge, techniques and understandings when reflecting with clients on the creative work produced during their therapy sessions.
- Agreement or Relevance: Both
- **CC8:** Write case notes and progress reports that incorporate imagery as necessary consistent with professional, organisational and legislative requirements.
- Agreement or Relevance: Both
- **CC10:** Assess a professional situation, determine the nature and severity of the problem, and call upon the required knowledge and experience to deal with the problem (or refer), in collaboration with the client where appropriate.
- Agreement or Relevance: Relevance

Additionally, to accommodate the feedback from the e-Delphi participants without each standard growing too lengthy, each standard was given an ‘important consideration’ statement which allowed for the flexibility of additional information to be incorporated meaningfully. There was one overarching ‘important consideration’ added for both the professional standards and the core competencies into the final agreed list.



Round Three

Of the 23 invited individuals, 21 completed the final round of the e-Delphi; only two were non-respondents. 8 out of 21 respondents had a comment during this round, with 13 respondents having no additional comments on these standards and competencies. Of the 8 respondents, 3 of the 8 individuals had comments on both the professional standards and the core competencies; 2 had comments only on the professional standards, 3 had comments only on the core competencies.

Participants were provided with the opportunity to detail any final comments they may have. Here, participants noted that they felt that the final standards were comprehensive:

“At this stage, these clauses/statements/areas look rather comprehensive - I appreciate that all will need to be reviewed periodically to ensure currency and relevance to ongoing developments as the profession continues to develop in responsive to the diverse and complex needs of populations, settings and contexts.”

“Very comprehensive and really like all core competencies and graduate outcomes listed.”

However, two participants also noted they would like to see some additional references to new graduates engaging in personal therapy:

“I wonder if the importance of personal therapy, as a part of ongoing personal development and self-care, might be helpful to include? For example: “New graduates are expected to be capable of demonstrating their competency in each of these core skills when graduating, including by being capable of determining in which situations they require support such as supervision, when clients fall outside of their scope of practice, or when the impact of practice requires them to access their own personal therapy to support them in their practice. They are expected to continue to demonstrate competence through practice, supervision, professional development, and logbook documentation.”

“The main point I can see missing from this, is that graduates (or even trainees) are recommended to do their own personal therapeutic work. This is incredibly important and overlooked in creative arts therapies. All trainees of creative arts therapies Masters programs should be undertaking psychotherapy of some form during their training and encouraged to continue this specifically when their personal material is activated/triggered in therapy with clients, in their workplace, or in their personal life.

Next Steps

The next stage of this project is to map compliance by each university in their Masters degree course content against the agreed professional standards and core competencies, developed and agreed by an international panel of experts in this stage of the project.

Dr Henry Bowen and MESHA have once again been contracted by ANZACATA to complete the next stage of the overall Course review Project in 2024. It is expected that in Stage 2, Dr Bowen will create a template for the universities which will include each professional standard and each core competency (already agreed) and a column for each university to fill in their course code, course name, graduate outcomes/learning outcomes and statement of how the course elements relate specifically to each standard and competency. Universities will be asked to offer specific detail of number of hours spent on each competency, the form of instruction used, and assessment undertaken to attain the competency.

The template will offer one or two examples (generated from international course information available or modified from local course guides). Universities will be requested to write succinct, evidence-based statements in the same form provided by the examples generated, so that their course content is mapped against the core competencies and professional standards developed in Stage One of the Project.

At the same time as the template for universities is being developed, Dr Bowen will also develop a template for internal ANZACATA use, which gives examples of expectations against each professional standard and core competency. This internal document will assist ANZACATA to be able to determine if universities are compliant with requirements when they fill in the template form in early 2024.

ANZACATA will report on these next steps in the overall project towards the end of 2024.



ANZACATA is the voice of all registered Creative Arts Therapists in Australia, New Zealand and Asia. We register professional Creative Arts Therapists; we approve training courses and we support members to maintain the highest standards of professional care. Go to our website to find a therapist in your area.

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