

Testimony on behalf of HB 2432 before the Oregon House Committee on Health Care
Monday, 13 February 2017

Chair and Members of the Committee,

My name is Jolie Guillebeau and I am currently a graduate student in the Masters of Arts Art Therapy Counseling program at Marylhurst University. As part of this program, I am required to complete 720 hours of client contact before my graduation in June. Though I am only beginning my career as an art therapist, I can already see the impact of this field on my clients.

As part of my training, I am currently an intern at a Child Psychiatric Day Treatment program, where I work with children ages 4-12 who have been diagnosed with Autism Spectrum Disorder, Traumatic Brain Injury, or Reactive Attachment Disorder as a result of Developmental Trauma. These are children who struggle with communication and emotional regulation, in addition to behavioral challenges. Because of these struggles, they are often mistrusting of adults, and are unable to verbally communicate their feelings or experiences. Art therapy has become a vital component of the treatment model within this program, because it offers opportunities and additional avenues for communication that can sometimes be limited.

In my limited experience, I've already seen art used as a way to build skills, communicate challenging feelings, learn to cope while developing emotional regulation skills and even as a way to comfort and reassure clients.

Tackling a challenging art project, or decorating a shoebox to look like a home or just a safe space for themselves, gives these kids confidence and a sense of self-determination. Using new skills, or overcoming frustration with a new material, offers a chance to build skills that will help them later in a classroom, an opportunity to process past trauma within a safe space, or even just a way to encourage becoming more comfortable with themselves.

Because the art can be empirical evidence of their success, these young clients cherish it and use it to ease the overwhelming emotions that come with transitions. The artwork can become an object of comfort and reassurance because it is a physical, tangible reminder of the good work they have already accomplished.

Prior to this experience I have worked as an art teacher for more than ten years, teaching in my private studio, therapeutic art centers, Portland Parks and Recreation, and Portland Public Schools. I love teaching art, but I became an art therapist because I recognized that there were limits to how I could help as a teacher. Unfortunately, not everyone recognizes those limitations, and even in my nascent career, I have already seen situations where vulnerable clients have been exposed to misinformed treatments by therapist or teachers practicing art therapy without understanding the full implications of the methods or materials they are using.

In my role as an intern, I can only do so much to protect these clients, but you can help me by passing HB 2342, to limit the practice of art therapy to those who have completed the necessary training and requirements.

Thank you for your time and attention, as well as all the work you are doing for the people of Oregon.