



OFFICIAL PREPARATION GUIDE

FOR THE

ART THERAPY CREDENTIALS BOARD EXAMINATION (ATCBE)

Revised May 2021

This preparation guide was developed by the Art Therapy Credentials Board, Inc. (ATCB) to provide information to art therapists who plan to take the ATCBE. Its purpose is to assist art therapists in developing a personal approach to preparing to take the ATCBE. Enhanced performance on the examination is neither expressed nor implied as a result of consulting this guide. The ATCB does not endorse or recommend any study guide available through other organizations, groups, or individuals. For all inquiries, we invite you to contact the ATCB National Office directly at atcbinfo@atcb.org (or by calling 877-213-2822).

ART THERAPY

CREDENTIALS BOARD, INC.

Dear Registered Art Therapist:

Thank you for your interest in becoming a board certified art therapist. The ATR-BC distinguishes those who have met and continue to satisfy standards defined by the profession. Possessing this credential demonstrates your commitment to providing quality services to your clients and indicates a commitment to the art therapy profession.

We hope that the following information will guide you through the certification process, from completing the application for the ATR-BC to maintaining your ATCB credentials. In this guide, you will find information about:

- the ATCB,
- board certification
- the application process,
- special test arrangements,
- examination scores,
- maintenance of credentials, and
- the examination.

The Art Therapy Board Certification Examination (ATCBE) is administered via computer-based testing. The ATCBE is offered throughout the year at over 500 designated testing centers throughout the United States. Please visit the [Examinations](#) page of the ATCB website for information on registering for the exam.

Please note that licensing boards may also administer the ATCBE for state licensing purposes. Those interested in state licensure are encouraged to contact their state certification board for specific information regarding this process. Passing the ATCBE to become licensed in a particular state **does not** automatically qualify you as an ATR-BC (board certification with the ATCB). The process for board certification after passing the exam for state licensure is available on the website.

If you have any questions, please contact the ATCB National Office toll-free at 877-213-2822 or email us at atcbinfo@atcb.org.

Sincerely,

The ATCB Board of Directors

THE ART THERAPY CREDENTIALS BOARD, INC. (ATCB)

Founded in 1993 as an art therapy credentialing organization, the ATCB creates and maintains standards for earning art therapy credentials. The mission of the ATCB is to protect the public by promoting the competent and ethical practice of art therapy through the credentialing of art therapy professionals.

In response to its mission, the ATCB offers four credentials:

- the Provisionally Registered Art Therapist (ATR-P),
- the Registered Art Therapist (ATR),
- the Board-Certified Art Therapist (ATR-BC) and
- the Art Therapy Certified Supervisor (ATCS).

ATCB credentials are solely owned and granted by the ATCB. Credential holders must adhere to the ATCB *Code of Ethics, Conduct, and Disciplinary Procedures* (the "Code"). The ATCB protects the public by reviewing and adjudicating ethical complaints made against credential holders as warranted and outlined by the "Code."

THE PURPOSE OF BOARD CERTIFICATION IN ART THERAPY

The purposes of the ATR-BC include, but are not limited to:

- providing national standards of professional practice in art therapy;
- recognizing art therapists who have met national professional art therapy standards as defined by the profession;
- promoting professional accountability; and
- requiring continuing professional growth and development.

ATCBE APPLICATION PROCESS

AVAILABILITY

The ATCBE is offered via computer-based testing at over 500 designated testing centers throughout the United States. Registration information can be found on the [ATCB website](#). Should you need assistance with the application process, please contact the ATCB National Office at atcbinfo@atcb.org or 877-213-2822.

APPLYING TO TAKE THE ATCBE FOR BOARD CERTIFICATION

To apply for board certification (ATR-BC), candidates must be current ATRs and complete the online ATR-BC application via [MyATCB](#). In addition, candidates must read all information included in the [Board Certification Application Handbook](#) and follow all instructions carefully.

Applicants are strongly encouraged to retain a copy of all submitted materials.

APPLYING TO TAKE THE ATCBE FOR STATE LICENSURE

In some states, a passing score on the ATCBE is a condition for licensure. If you are interested in taking the ATCBE for state licensure, you must comply with your state's licensure process. Please refer to the [state licensure](#) provided on the ATCB website and contact your state licensure board for specific requirements.

State approval is required to take the ATCBE for state licensure. To apply for the exam, you must complete the application online via [MyATCB](#). Please read all information included in the application and follow all instructions carefully. **In addition, you must submit a copy of your approval letter from your state board to be approved to sit for the exam.** Applicants should retain a copy of all submitted materials.

Taking the ATCBE for state licensure **DOES NOT** qualify you as an ATR-BC. However, suppose you are a Registered Art Therapist (ATR) in good standing and have already passed the ATCBE as part of your state licensure in the past five years (60 months). In that case, you may apply for Board Certification (ATR-BC) using your passing ATCBE score. You must [apply via MyATCB](#), and you must have taken and passed the ATCBE for state licensure within the preceding five years (60 months) before submitting your application.

NONDISCRIMINATION POLICY

The ATCB is committed to operating its programs in a nondiscriminatory manner and affirms that it shall not discriminate based on race, color, religion, marital status, national origin, ancestry, sex, sexual orientation, gender identity, physical or mental disability, medical condition (including but not limited to cancer-related or genetic characteristics), pregnancy, age, citizenship, or service in the uniformed services (as defined by the Uniformed Services Employment and Reemployment Rights Act of 1994).

APPLICATION FEES

Current fees for taking the ATCBE are available on the [ATCB website](#).

Applicants are required to pay all fees for the ATCBE at the time of application.

REFUND POLICY

After completing the ATR-BC application and submitting payment, if the applicant cannot take the examination, they may request a refund by submitting a request to the ATCB National Office at exams@atcb.org. This request must be sent a minimum of 30 days before the examination date. The request will be reviewed by the ATCB Board of Directors and will be allowed only at their discretion.

Requests for refunds made after the deadline above must be due to emergencies and verified by documentation. They will be decided on a case-by-case basis and at the discretion of the ATCB Board of Directors. There will be no refund for "no shows."

COMPLETING THE APPLICATION FORM

Your application form must be completed carefully and accurately. ATCB will use the information you provide in the application to determine your eligibility to sit for the examination.

Be sure to update both your email and postal mailing addresses in [MyATCB](#), as the ATCB will send you essential exam-related information via email and your ATR-BC certificate to your mailing address.

CONFIRMATION EMAIL

Once your application has been processed and you have been approved to sit for the ATCBE, you will receive a confirmation email from the ATCB. It will contain important information related to scheduling your exam with the testing provider, PearsonVue.

QUESTIONS

Any questions concerning application procedures that remain after reading this guide should be addressed to the ATCB National Office. You can email your questions to exams@atcb.org or call 877-213-2822 between 8:30 A.M. and 5 P.M. ET, Monday through Friday.

SPECIAL TEST ARRANGEMENTS

ADA ACCOMMODATIONS

In compliance with the Americans with Disabilities Act (ADA), the ATCB makes reasonable special testing arrangements for candidates with disabilities. Under the ADA, a *disability* is defined as "a physical or mental impairment that substantially limits one or more major life activities" (*e.g.*, caring for oneself, performing manual tasks, walking, seeing, breathing, learning, and working). Therefore, an applicant must have a documented disability as defined by the ADA to request special testing accommodations.

Persons with "transitory" or "temporary" conditions (*e.g.*, sprains, fractures, and medical emergencies) who desire accommodations should contact the ATCB as soon as possible. While the ADA does not require the ATCB to accommodate "transitory" or "temporary" conditions, accommodations for candidates with such conditions will be considered on an individual basis.

An applicant requesting accommodation(s) must request in writing to the ATCB National Office. The request must include a letter from the applicant's healthcare provider documenting the disability and the requested testing accommodations. Such documentation must be professionally prepared and appear on the professional's stationery or official letterhead. In addition, the healthcare professional must be a licensed or otherwise qualified professional whose credentials are appropriate to diagnose and evaluate the applicant's disability.

Regardless of when the original diagnosis of a disability was made, the healthcare professional must have knowledge within the last three (3) years of the candidate's disability and must have diagnosed, evaluated, treated, or consulted with the candidate within the previous three (3) years.

For a learning disability or mental disorder, the professional's report must include the applicant's current Diagnostic and Statistical Manual of Mental Disorders (DSM) classification. However, the diagnosis of a disorder with a DSM classification does not necessarily mean that the applicant has a disability defined in the ADA that the ATCB must accommodate.

For candidates with physical or health-related disabilities (*e.g.*, blindness, deafness, diabetes), copies of medical records are not necessary; however, the candidate must provide sufficient documentation from a physician that confirms the diagnosis of a physical or health-related disability "that substantially limits a major life activity." To demonstrate this, the individual must show that they experience substantial impairment in such activities as caring for themselves, hearing, seeing, learning, or walking, in more than one setting (*e.g.*, work, school, socially). Pregnancy is not a disability; however, if a candidate is pregnant and has a resulting medical complication resulting in a disability, special testing accommodations will be considered on a case by case basis.

Testing accommodation recommendations should be reasonable and appropriate for the candidate's documented disability and cannot fundamentally alter the measurement of the knowledge and skills that the examination is intended to assess. Therefore, prior testing recommendations and any history of accommodations will be considered but do not guarantee accommodations on the ATCBE.

Once an accommodation request has been received, it will be reviewed by the National Office, in consultation with the Board of Directors and/or legal counsel, as appropriate. If additional information is required to consider a special accommodation request, the applicant will be notified.

Candidates requesting nonstandard testing accommodations must send their written request and supporting materials to the ATCB National Office at least 60 days before the scheduled examination date. All requests are reviewed individually and are subject to ATCB approval. If an applicant's accommodation request is approved, the applicant and the testing center will be notified of the special accommodation.

SPECIAL EXAMINATION ACCOMMODATIONS FOR STATE EXAMINEES

If you are planning to test for state licensure and need testing accommodations, you must contact your state licensure board for information regarding testing accommodations. The ATCB cannot provide accommodations without approval from your state licensure board.

RELIGIOUS REASONS

An applicant may request an accommodation for religious reasons to administer the examination outside the regularly scheduled time frame. To make this request, the candidate should submit a completed application and all applicable fees. At least 60 days before the original examination date, the candidate must submit a written request to take the examination on another day due to religious reasons and include documentation from the applicant's clergy. This documentation must be written and provided on official letterhead. The written request and supporting documentation should be sent to the ATCB National Office to notify the candidate whether it is approved or denied. If the request is approved, the ATCB National Office will arrange for an alternate examination date that adheres to the applicant's religious requirements. Alternate dates are determined by the ATCB and the examination administration site.

ENGLISH AS A SECOND LANGUAGE

If English is not the applicant's native language, the applicant for board certification may request additional testing time and the use of a word-to-word translation dictionary. (The dictionary must be non-electronic, must not define terms, and must be supplied by the examinee. The exam administrator will examine the dictionary before use.) There is a \$60 fee for this accommodation in addition to the standard application fee, which must be paid at the time of application. This fee is non-refundable if you do not end up using the additional time or dictionary.

SPECIAL ARRANGEMENT DENIALS

Any applicant whose request for Special Test Arrangements (ADA, ESL, Religious, or Test by Exception) is denied may request reconsideration of the denial by the ATCB Board of Directors. Any such request must be made in writing to the National Office at exams@atcb.org and must be dated no later than seven (7) days after receiving the denial notice. The decision on reconsideration is final.

TEST CENTER REGULATIONS

Strict security measures are maintained throughout all phases of the ATCB Examination development and administration process. Computer-based administration requires the following:

1. At the test center, all candidates must present two signed forms of identification, one of which must be a government-issued photo ID (driver's license, passport, military ID, etc.) to take the examination. If you do not have a government-issued photo ID, please contact the ATCB to receive additional instructions. **No exceptions to these requirements will be made.**
2. Candidates must arrive at the test center **30 minutes** before the scheduled testing time unless otherwise noted by the testing center. Late arrivals cannot be admitted to the test center.
3. Devices with memory capabilities; books, papers, and notes; and large personal possessions such as briefcases or backpacks will not be permitted in the examination area. Instead, they must be left with testing center personnel.
4. Cellular phones, calculators, and other electronic devices are **NOT** allowed in the testing room.
5. Food and beverages are not allowed in the testing room.

Trained proctors will supervise the administration of the examination and maintain strict security throughout the testing period. Irregularities observed during the testing period, such as creating a disturbance, giving or receiving unauthorized information or aid, or attempting to bring in or remove test materials or notes from the testing room, will be sufficient cause to terminate candidate participation.

EXAMINATION SCORING AND REPORTING

The examination score for the Art Therapy Credentials Board Examination (ATCBE) is determined only through your performance. The methodology used to determine the passing point is a modified Angoff method. This method requires the ATCBE standard-setting committee to review and evaluate each question on one version of the exam, in alignment with the published content outline, to determine the passing score that would be expected from a minimally qualified candidate. It is important to note that a candidate's ability to pass the examination depends on the knowledge and skill of the candidate and not on the performance of other test-takers.

The passing score obtained through standard-setting on the first version (base form) of the exam is applied to other ATCBE test versions through statistical equating. Statistical equating adjusts the passing score up or down by accounting for the overall difficulty of each test form. Therefore, statistical equating ensures fairness to all candidates by associating the cut score on

a test form with the overall difficulty level of the items. Statistical equating may cause the passing scores to vary slightly for each ATCBE test form.

The process of statistical equating uses a 25% overlap of items between the base form and the new test form. These common items constitute an equating link between the forms. Equating ensures that the average difficulty level (p -value) for all exam versions are close range. These measures ensure that the candidates who pass the ATCBE have the knowledge and understanding expected from a minimally competent art therapist to receive the ATR-BC credential.

The ATCB will email candidates their official examination results approximately are available in the MyATCB portal. They will ONLY be available in the portal. This occurs approximately eight (8) to ten (10) weeks following the examination date.

RESULTS WILL NOT BE GIVEN OVER THE TELEPHONE OR VIA EMAIL

CERTIFICATION

Each candidate who meets current ATR-BC application requirements and passes the examination for board certification purposes will receive a certificate suitable for framing and will be allowed to designate themselves as a Board-Certified Art Therapist (ATR-BC).

RETESTING

Examinees who do not pass the ATCBE shall receive a letter informing them of their right to appeal. (See appeal procedures below.) No examinee may take the ATCBE more than 3 times in 12 months, whether for board certification or state licensure. Individual states may have further restrictions regarding retesting for licensure applicants.

TESTING IRREGULARITIES

Candidates that experience anything that may have impacted their performance must report the irregularities to the National Office at exams@atcb.org within 72 hours of taking their exam.

APPEALS

Any candidate who fails to pass the ATCBE is entitled to an appeal. To appeal, the candidate must submit to the ATCB National Office (appeals@atcb.org) their request to appeal. This email must include a detailed explanation for the appeal (providing all relevant documentation) within 30 days from receiving notice of the examination results.

The ATCB Board of Appeals will review appeals in accordance with their policies and procedures.

Following best practices for the validity of the exam, test scores cannot be changed, but alternatives such as retesting may be allowed.

MAINTENANCE OF THE ATR-BC CREDENTIAL

To maintain the ATR-BC credential, the certificant must do all of the following:

- pay the annual maintenance fees,
- complete a recertification process every five (5) years and
- adhere to the ATCB [Code of Ethics, Conduct, and Disciplinary Procedures](#).

The ATCB reserves the right to revoke the certification of anyone who does not comply with the above.

FEES

Paying annual fees is required to maintain ATCB credentials. Since the ATR is a prerequisite for the ATR-BC, board-certified art therapists must also preserve the ATR credential. There is a \$100 renewal fee. These fees support the continued updating of the credentialing processes, the adjudication of ethical issues, daily operational costs, activities that promote arttherapy's professional practice and ensuring public protection. Credential holders are billed for annual maintenance fees in May

FIVE-YEAR RECERTIFICATION

Every five (5) years following the ATR-BCs certification date, a recertification process must be completed. The ATCB Board of Directors defines this process. A copy of the recertification standards is available on the [ATCB website](#). Completing the recertification application, ethics attestation and payment of the recertification fee must be done on the [MyATCB](#) portal. The recertification fee is \$100. This is in addition to the annual ATR renewal fee.

It is the responsibility of the ATR-BC to be knowledgeable about the requirements and any revisions to the recertification process or procedures. Any changes to the recertification process will be published on the ATCB website and/or in the organization's online publications. A copy of the current [Recertification Standards](#) document is available on the ATCB website.

Recertification may be accomplished by retaking the ATCBE or accruing 100 continuing education credits (CECs). ATR-BCs are encouraged to maintain a file containing the CECs completed. In addition, the ATCB provides an online Recertification Tracker option, which is accessible via [MyATCB](#), in which ATR-BCs may enter their CE activities and upload supporting documentation.

Ninety (90) days before the five-year recertification deadline, the ATCB National Office will send recertification notices to all ATR-BCs who are due to recertify. Requirements are detailed in the [Recertification Standards](#). Credential holders are responsible for keeping their contact information accurate with the ATCB National Office. Changes to contact information must be

updated via [MyATCB](#).

Ten percent (10%) of those eligible to recertify will be randomly selected for audit. These candidates will receive notification that they have been selected for audit. Only audited candidates must submit documentation (such as certificates of attendance from qualifying programs and transcripts) verifying CE activities. In addition, all candidates must submit their completed five-year recertification application.

Each candidate will be notified of the outcome of their recertification application review. If approved, the ATCB will mail the ATR-BC a new certificate to the mailing address on record.

If the ATCB determines an application for recertification to contain deficiencies, the candidate will be notified by email. The candidate will have 90 days to provide additional information regarding the CECs submitted for recertification and/or any CECs earned since being notified of existing deficiencies.

Recertification candidates who have been notified of deficiencies will be placed on probationary status during the 90 days mentioned above. However, if the documentation that verifies compliance with ATCB requirements is submitted within that time frame, such probation will be removed and recertification granted.

Candidates who are not recertified by the ATCB through the above process will be required to apply for certification through a new application process and meet current requirements to become board certified again. This would include retaking the Art Therapy Credentials Board Examination (ATCBE).

Candidates wishing to apply for a 90-day extension of their recertification deadline must do so online via [MyATCB](#). Candidates must explain the need for an extension and must pay a recertification extension fee of \$50. The National Office will forward the request to the Board of Directors for their review and consideration. Once a determination has been made, the recertification applicant will be notified in writing.

EXAMINATION INFORMATION

A national job analysis survey is conducted every five years by the ATCB to define the art therapist's role and describe the responsibilities, tasks, knowledge, and skills necessary to practice the profession. The survey is distributed to professional art therapists. You may have received a request to participate in the past. The analysis of the survey data is used to ensure that the examination accurately assesses the knowledge base and skills required of practicing art therapists.

The certification examination is typically composed of 200 multiple-choice questions. Of these, 170 are used for scoring purposes. The remaining 30 items are in development for future examinations. These development items are not identified to the examinee.

Candidates have four hours to complete the examination.

PREPARING FOR THE EXAMINATION

The ATCBE is a professional credentialing exam, and as such, requires thoughtful preparation. The following checklists are provided to assist candidates in preparing for the exam.

DEVELOP AN EFFECTIVE STUDY PLAN FOR REVIEW AREAS

- Identify your own best methods of studying (e.g., alone or with others, time of day, location, by rewarding yourself at intervals).
- Organize all information about the exam procedure and the topics covered by the exam.
- Become familiar with the type of questions, topic areas, etc. as given in this guide.
 - Prioritize concepts and topics to study.
 - Identify your strengths and areas you may struggle
 - Be systematic; determine what material you can briefly review and what material you need to concentrate on more in-depth.
- Read the sample questions to familiarize yourself with the nature and format of the questions that will appear on the examination.
- A reference list is given under "Suggested Reading" in this guide. This list is not meant to represent all knowledge required for mastery in the field of art therapy, nor are exam questions taken from this material, per se. Instead, the list is an aid to give you an idea of sources that can be used to review areas in which you may feel your training or experience is deficient.
- As an art therapy credential-holder, you are required to abide by the *ATCB Code of Ethics, Conduct, and Disciplinary Procedures*. Be sure you are familiar with this document and do not confuse it with the *Ethical Principles for Art Therapists* of the American Art Therapy Association. These are two separate codes.
- Manage your time to ensure ample time to review content before testing.

KNOWLEDGE AREAS

The following section includes an outline of the major content areas of the examination. The major content areas were determined by the results of the ATCB's national art therapy Job Analysis Survey. The following content areas are covered in the exam:

- I. Theoretical Approaches
- II. Intake and Evaluation
- III. Assessment and Evaluation Instruments
- IV. Diagnosis and Populations
- V. Art Therapy Environment
- VI. Professional Practice and Ethics
- VII. Clinical Skills and Application

The ATCBE [Content Outline](#), available on the ATCB website, details what each section contains.

You should be able to apply the knowledge included in each content area to the various practice dimensions. The knowledge covered by the certification examination will be tested at three cognitive levels:

- basic understanding (recall of knowledge),
- application (applying knowledge to a particular example)
- mastery (analysis, synthesis, and evaluation).

For example, some questions require factual recall; others require you to apply knowledge to a clinical scenario. Each section contains sample questions that have been retired from use in the ATCBE. The answers to the sample questions may be found at the end of this preparation guide.

I: THEORETICAL APPROACHES

This content area assesses your knowledge of theoretical approaches in art therapy. Examples of tasks measured by this content area include, but are not limited to:

1. In creating a "holding environment" and a "good-enough mothering experience," an art therapist closely follows the principles of which of the following theorists?
 - A. Kramer
 - B. Jung
 - C. Winnicott
 - D. Horney
2. An art therapist is working with a group of eight- to ten-year-olds. She notices that the drawings feature scenes depicting action, figures interacting, and detailed environments. According to Victor Lowenfeld, this represents which stage of artistic development?
 - A. Preschematic stage
 - B. Schematic stage
 - C. Formal operational
 - D. Dawning realism
3. During group art therapy sessions, a child has displayed increased interest in learning new art techniques and exhibits more satisfaction in peer relationships than in solitary activities. Which Eriksonian stage of psychosocial development is most applicable to this client?
 - A. Autonomy

- B. Individuation
 - C. Industry
 - D. Initiative
4. A Jungian art therapist working with clients who have dissociative experiences notes that the artwork of many of her clients includes representations of aspects of the self that are identified as wise or nurturing. This would be best described as an example of which of the following?
- 1. Archetype
 - 2. Reintegration
 - 3. Shadow
 - 4. Myth
5. Cognitive Behavioral therapy strives to
- A. build a strong therapeutic relationship.
 - B. alter thought patterns that lead to self-destructive behavior.
 - C. promote the client's receptivity to therapeutic intervention.
 - D. highlight the client's need for self-esteem and self-actualization.
6. Which of the following is the defense mechanism most frequently used by clients with depression?
- A. Displacement
 - B. Projection
 - C. Reaction formation
 - D. Introjection
7. According to Maslow, which of the following represents the order of a person's needs?
- A. Safety, belonging and love, physiological, self-esteem, self-actualization
 - B. Safety, physiological, belonging and love, self-esteem, self-actualization
 - C. Physiological, safety, belonging and love, self-esteem, self-actualization
 - D. Physiological, belonging and love, safety, self-esteem, self-actualization

II: INTAKE AND EVALUATION

This content area assesses your knowledge on gathering and applying information needed for treatment planning and ongoing evaluation. Examples of tasks measured by this content area include, but are not limited to:

1. An art therapist meeting with a client for her initial interview. The client was recently

hospitalized for a suicide attempt and is working with a psychiatrist for medication management. The art therapist wants to communicate with the psychiatrist. What should the art therapist do?

- A. Obtain the client's verbal permission to contact the psychiatrist.
 - B. Request the client sign a release to transfer her hospital records.
 - C. Direct the client to have her psychiatrist contact the art therapist.
 - D. Obtain a signed release from the client to contact the psychiatrist.
2. A 20-year-old male is referred to an art therapist for a provisional diagnosis. After making a scribble drawing, he shares that "I see bats feeding in the tropical trees." In order to complete the provisional diagnosis, which of the following actions should the art therapist initiate next?
- A. Ask what kind of bats he has drawn.
 - B. A second structured art assessment.
 - C. A corroborating Rorschach or TAT.
 - D. Inquire about drug and alcohol use.
3. A family is completing an initial art therapy session. The art therapist has obtained releases to speak to the referring therapist. The art therapist also has explained to the family the fee structure, the duration of therapy, payment requirements, her theoretical approach, and the retention of records. What additional element is mandatory for the therapist to explain to the family?
- A. Reporting of abuse
 - B. Results of assessments
 - C. Releases for use of artwork
 - D. MSDS information
4. When writing objectives in a client's treatment plan, goals must be
- A. brief and concise.
 - B. written on the agency's form.
 - C. measurable and observable.
 - D. clear and easy to read.
5. When an art therapist may see a client for only one session, which of the following concepts would be most effective?
- A. emphasizing the creative process
 - B. exploring patterns of color and form
 - C. emphasizing symbolic representations
 - D. exploring the quality of the art product

6. An art therapist has been asked to evaluate an adult client in a day treatment center to determine whether he would benefit from art therapy after his discharge. What would be the best source of information to help the art therapist make her recommendation?
- A. Goals identified by the referring psychiatrist and the treatment team
 - B. A treatment plan formulated from observations of the client in a group
 - C. An initial interview and a standardized art therapy assessment
 - D. A mini mental status exam and a personal interest questionnaire
7. A middle-aged male, confined to a wheelchair since a car accident, has been persuaded by his wife to see an art therapist. She reports that her husband is depressed and that he needs something to do and likes to work with his hands. Which of the following approaches should the art therapist use first to determine the client's needs?
- A. Encourage him to participate in structured art tasks.
 - B. Explore his feelings about the car accident and his physical disability.
 - C. Explore how he perceives himself and his current situation.
 - D. Invite him to make a list of his interests before the car accident.
8. An 18-year-old entered a treatment center for drug rehabilitation because he had been using drugs for 11 years and was in trouble with the law. When he was a child, he was sexually and physically abused by his stepfather. During an intake session with the art therapist, the client spontaneously made this drawing (**Figure 1**). Which of the following actions should the art therapist take first?

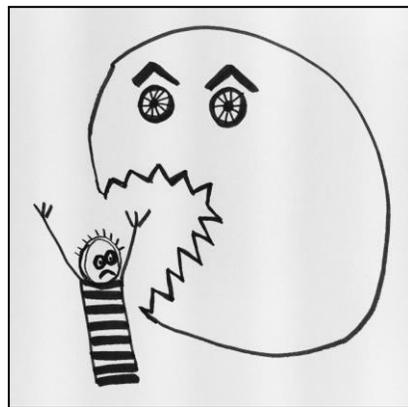


Figure 1

- A. Recommend a therapy group for survivors of sexual abuse.
- B. Have the client explore his associations to the drawing.
- C. Suggest psychiatric testing for possible psychosis.
- D. Refer the client for drug testing to assess possible relapse.

III: ASSESSMENT AND EVALUATION INSTRUMENTS

This content area assesses your knowledge of and competence in the application of specific assessment and evaluation instruments. Examples of tasks measured by this content area include, but are not limited to:

1. The first indication that a child is functioning at the schematic stage is the emergence of a:
 - A. mandala
 - B. figure
 - C. baseline
 - D. house

2. What does the Diagnostic Drawing Series assess?
 - A. deficiencies in social and emotional functioning.
 - B. incongruities between verbal and nonverbal drawing behavior.
 - C. need for psychotherapeutic and psychopharmacological treatment.
 - D. response to structured and unstructured drawing tasks.

3. When conducting art therapy assessments with clients who have developmental disabilities, it is most important to
 - A. focus on strengths the clients possess.
 - B. understand the cause of the disability.
 - C. learn something about the family history.
 - D. know what medications they take.

4. A client is participating in an art therapy assessment and is required to use white drawing paper and sixteen oil pastels. The client is most likely completing which assessment?
 - A. The Diagnostic Drawing Series (DDS)
 - B. The Ulman Personality Assessment Procedure (UPAP)
 - C. The Person Picking an Apple From a Tree (PPAT)
 - D. The Levick Emotional and Cognitive Art Therapy Assessment (LECATA)

5. When assessing children's drawings, it is important to consider the differences between emotional indicators and
 - A. body image.
 - B. demographic characteristics.

- C. developmental level.
 - D. learning disabilities.
6. A variety of art therapy assessments are available to elicit specific information from clients. The art therapist is attempting to elicit information about the client's cognitive functioning through a scribble drawing. Which assessment contains this directive.
- A. Diagnostic Drawing Series
 - B. Rubin Diagnostic Art Interview
 - C. Silver Stimulus Drawing Sequence
 - D. Ulman Personality Assessment Procedure

IV: DIAGNOSES AND POPULATIONS

This content area assesses your knowledge of characteristics and needs of specific diagnoses and populations. Examples of tasks measured by this content area include, but are not limited to:

1. It is most important to consider the differences between emotional indicators and developmental indicators when assessing the drawings of
 - A. adult survivors of childhood trauma
 - B. older adults
 - C. adolescents
 - D. people with learning disabilities
2. When working with children and people with developmental disorders, the most important feature of the media used is that it be
 - A. multi-sensory.
 - B. easy to clean up.
 - C. non-toxic.
 - D. simple to use.
3. A condition characterized by constriction in the ability to experience emotions, an impoverished fantasy life, and concrete descriptions of experiences is termed
 - A. antisocial.
 - B. anhedonia.
 - C. dissociation.
 - D. alexithymia.
4. A client in hospice participating in art therapy creates artwork during each session. The client verbalizes little about himself or his artwork, most of which he gives to his

caregivers and visitors. Which of the following is the most appropriate goal for art interventions?

- A. Breaking down emotional defenses to address the client's fear of dying
 - B. Focusing on life accomplishments to address the client's low self-esteem
 - C. Supporting the client in expressing his needs and feelings to others
 - D. Encouraging caregivers to create artwork in response to the client's images
5. An adult client in an outpatient treatment center exhibits risk-taking behavior, impaired judgment, and restlessness. When the art therapist attempts to address this behavior, the client becomes irritable and lies to conceal the extent of her problem. These symptoms are most indicative of which impulse control disorder?
- A. Trichotillomania
 - B. Dyssomnia
 - C. Pathological Gambling
 - D. Intermittent Explosive Disorder
6. In the initial stages of art therapy treatment with an adolescent who is a recent immigrant from Asia, what should the art therapist encourage?
- A. Open expression of strong emotions
 - B. Alignments outside the community to promote assimilation
 - C. Symbols that are understood and endorsed by her community
 - D. Self-assertion and independence
7. An art therapist is working with a 17-year-old in a 30-day chemical dependency treatment program and has observed incongruences between his drawings and verbal associations. Which one of the following actions should be pursued first when addressing this problem?
- A. Explore the images and verbalizations with the client.
 - B. Refer the client for an immediate urine drug screen.
 - C. Consult with other members of the treatment team.
 - D. Refer the client for comprehensive cognitive testing.

V: ART THERAPY ENVIRONMENT

This content area assesses your knowledge on the importance of creating and maintaining a safe and secure therapeutic environment. Examples of tasks measured by this content area include, but are not limited to:

1. An art therapist was asked to conduct a group consisting of older adults who are frequently disoriented and have limited mobility. The goal of the group is to increase

socialization. The only possible space on the unit to hold a group is in the patient dining room, which contains six tables and a tiled floor but has no sink. The therapist's primary concern should be to ensure that

- A. only dry art materials be provided with the possible exception of watercolor and acrylic paints.
 - B. wheelchairs are in a locked position once clients are at their tables to prevent chairs from being moved.
 - C. tables are cleared of all food and utensils prior to the group to minimize confusion about use of the dining room.
 - D. no interruptions by ward personnel occur during the group sessions as this may disturb the art therapy process.
2. An art therapist in an alternative school setting is working with students who struggle within appropriate interpersonal skills. They have been referred to the facility for violations with drugs, weapons, or truancy. There have been daily violent outbursts by various clients. Which art activity would best keep the environment safe while promoting creative self-expression?
- A. Wall mural
 - B. Wood sculpture
 - C. Magazine collage
 - D. Wedging clay
3. An art therapist has a group session with psychiatric patients. In order to provide the safest environment for the therapist she should
- A. provide non-toxic art materials.
 - B. position herself closest to the door.
 - C. limit number of group participants.
 - D. clarify the rules at the start of each group.
4. What is the primary health concern when working with earthen-type clays?
- A. inhalation of dust
 - B. bacteria in clay
 - C. ingestion of clay
 - D. lead in clay
5. Which of the following requires framing behind glass?
- A. pastel on clayboard
 - B. pastel on vellum
 - C. watercolor on canvas

- D. collage on art board
6. When using lye in papermaking, which of the following safety directives should be observed?
- A. Never let the lye/paper pulp mixture come to a boil.
 - B. Wear rubber gloves and a protective eye shield.
 - C. Wear a mask and ensure proper ventilation.
 - D. Never add bleach to the lye/paper pulp mixture.

VI: PROFESSIONAL PRACTICE AND ETHICS

This content area assesses your knowledge on the practice of art therapy within the scope of legal and ethical guidelines. Examples of tasks measured by this content area include, but are not limited to:

1. Researchers encounter an ethical problem when using a placebo if some of the participants are denied
 - A. information.
 - B. one-to-one debriefing.
 - C. informed consent.
 - D. treatment.
2. An art therapist is hired by an inpatient facility for adolescents with behavioral problems. The job description is "to reinforce positive and appropriate behavior by providing therapeutic art activities." In the art therapist's first group, several participants depict vodka bottles, cigarettes, and marijuana leaves. The facility has a strongly enforced policy against the expression of "inappropriate subjects" such as drugs. What must the art therapist do in this situation?
 - A. Encourage them to discuss the issues raised in their work.
 - B. Adhere to and reinforce the facility's regulations.
 - C. Plan an activity with more structure for the next class.
 - D. Educate staff on the value of art as a teaching tool.
3. An art therapist is teaching a college class entitled "Introduction to Art Therapy." A student comes to class appearing distraught and asks to see the teacher for a therapy session later that day, stating that her own therapist is on vacation. The art therapist's first course of action should be
 - A. to agree to contact the therapist's answering service for the student right after class.
 - B. tell her to contact her therapist's answering service to see who is covering for the therapist.
 - C. refer the student to the college counseling center for the first available session.

- D. ask the student to do artwork about the situation to express her feelings.
4. An art therapist presents a client's picture (**Figure 2**) to his treatment team in a psychiatric hospital. The nurse, psychiatrist, and psychologist all remark on how the bent-over tree represents the client's lack of hope and depressed mood. What would be the best response for the art therapist to make to the team?



Figure 2

- A. The rain clouds are also indicators of difficulties.
B. The team should rely on the art therapist's interpretation.
C. The imagery is indicative of hope and resiliency.
D. The client's associations to the image must be considered.
5. According to the Health Insurance Portability and Accountability Act (HIPAA), clinical arttherapy notes can be
- A. shared with the client's health insurance carrier.
B. released with the client's authorization.
C. reviewed by the client and involved family members.
D. used for on-going treatment planning.
6. A hospital is preparing for an accreditation review by the Joint Commission. The facility's art therapist will most likely be asked to provide which of the following?
- A. an inventory of Universal Precautions Protocol
B. a record of Sharps Inventory Logs
C. a record of Continuous Quality Improvement
D. an inventory for Material Safety Data Sheets

VII: CLINICAL SKILLS AND APPLICATION

This content area assesses your knowledge of the provision of services that encompass all aspects of the therapeutic process. Examples of tasks measured by this content area include, but are not

limited to:

1. A 77-year-old Caucasian woman is admitted to a long-term care facility with a diagnosis of Dementia of the Alzheimer's Type. Which artist's work would be most likely to promote reminiscing for this patient?
 - A. Norman Rockwell
 - B. Georgia O'Keeffe
 - C. Andy Warhol
 - D. Grandma Moses

2. A patient was admitted to a psychiatric hospital with severe symptoms of paranoid and delusional thinking. After three days, he voluntarily joined a structured art group held on the hospital unit. "Draw a landscape" was a suggested topic. The patient filled his paper with various lines and scribbles using several colored markers. There was no obvious representation in his drawing, and he shrugged when asked to say something about it. What would be the most effective approach the art therapist could take?
 - A. Ask the group to help him process his work.
 - B. Point out any resemblance to a landscape in his drawing.
 - C. Thank him for coming to the group and making a drawing.
 - D. Offer him technical assistance with his drawing.

3. As an art therapist watches a client create a pencil drawing, he notices the thickness of line, use of space, and variety of shapes. This therapist is attending to the
 - A. cathartic experience of the client.
 - B. formal elements of the art.
 - C. interpersonal conflict of the client.
 - D. diagnostic information in the art.

4. Which statement about art products is most often true?
 - A. Art products are essential to the efficacy of art therapy treatment.
 - B. A client's art product may need to be fixed at the end of the session.
 - C. The art product is the only way to infer meaning from the art process.
 - D. Emphasis on the art product may detract attention from the process.

5. Which of the following is the correct term to describe the primary visual cue operating in this picture (**Figure 3**)?



Figure 3

- A. Isolation
 - B. Encapsulation
 - C. Rejection
 - D. Distancing
6. Which is **NOT** a basic task of the group art therapist?
- A. using transparency to model disclosure
 - B. comparing and contrasting client art products
 - C. demonstrate effective use of art materials.
 - D. identifying both personal and group goals

SUGGESTED READING

In preparing for the exam, applicants should be advised that the [content outline](#) is the best resource. It is recommended that you review the outline, identify specific areas that you feel competent in your knowledge base, and identify those you do not. For those that you do not feel competent, it is recommended that you utilize your resources to refresh your knowledge.

It may be helpful for some applicants to connect with others preparing for the exam to form study groups.

Applicants are also advised to consult professional journals such as *Art Therapy: Journal of the American Art Therapy Association*; *The Arts in Psychotherapy*, and *The International Journal of Art Therapy (formerly Inscape)*.

The following references may be helpful as an overview of several areas:

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

Gussak, D. & Rosal, M. (Eds.). (2016). *The Wiley handbook of art therapy*. West Sussex, UK: Wiley Blackwell.

Malchiodi, C. (2012). *The handbook of art therapy* (2nd ed.). New York, NY: Guilford.

Rubin, J. (2016). *Approaches to art therapy: Theory and technique* (3rd ed.). Philadelphia, PA: Brunner-Routledge.

The following document is available through the ATCB website:

- [ATCB Code of Ethics, Conduct, and Disciplinary Procedures](#)

The following document is published by and available through the AATA website:

- [AATA Ethical Principles for Art Therapists](#)

ANSWERS TO SAMPLE QUESTIONS

I: Theoretical Approaches

1. C
2. D
3. C
4. A
5. B
6. D
7. C

II: Intake and Evaluation

1. D
2. B
3. A
4. C
5. A
6. C
7. C
8. B

III: Assessment and Evaluation

Instruments

1. C
2. D
3. C
4. D
5. A
6. D

IV: Diagnosis and Populations

1. C
2. C
3. D
4. C
5. C
6. C
7. A

V: Art Therapy Environment

1. C
2. C
3. B
4. A
5. B
6. B

VI: Professional Practice and Ethics

1. C
2. B
3. B
4. D
5. D
6. B

VII: Clinical Skills and Application

1. A
2. C
3. B
4. D
5. B
6. B