

## Making Referrals

- Talent and aptitude for art are irrelevant.
- Motivation and willingness to experiment are better indicators of good outcomes than the nature of the distress or disturbance.

Like all psychotherapies, art therapies need a 'customer'. A customer is someone who acknowledges a psychological problem, and is a willing partner in the work. This may not always be overt. An art therapy assessment will provide a better guide to suitability and likely length of treatment than general guidelines.

Time scales for treatment vary enormously between individuals and kinds of problem. Short interventions may be able to help where a difficulty is very specific. Many neurotic-type problems respond within a year. Other kinds of difficulty, where there is severe disturbance or disability for example, may require ongoing support. An effective therapeutic intervention is a one-off investment. It may offer clients and referrers a way out of the 'revolving door' of distress and treatment that is so familiar to GPs.

The best way forward with a potential referral is to discuss it first with an art therapist.

## Who are Art Therapists?

Art therapists usually come from an arts background, but receive, in addition, a thorough and intensive postgraduate training in therapeutic practise. (The identifying acronyms are Dip.A.Th., and R.A.Th). Creative therapies trainings are DoH approved and monitored, and a professional code of practise is established and legally enforceable, unlike other psychotherapies.

## Finding Art Therapists

In some areas there are already art therapists in NHS posts who are available for GP referral. There are also often independent art therapists available.

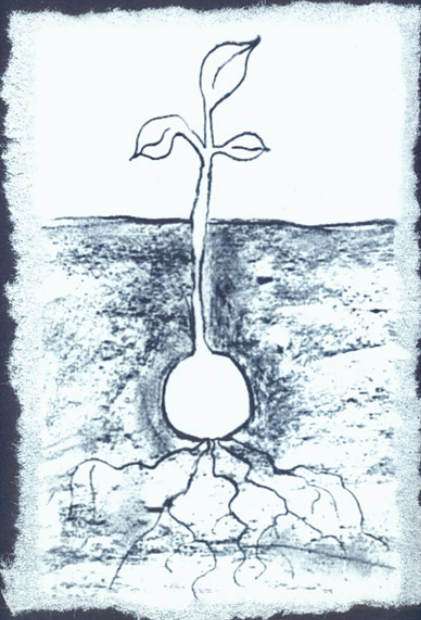
### Your local contact is:

Or contact the  
British Association of Art Therapists  
at 5 Tavistock Place, WC1H 9SN,  
or the regional BAAT co-ordinator :

Prepared by Malcolm Learmonth with BAAT Regional Group 1.

# ART THERAPY:

A Flexible  
Mental Health Resource  
for GP Referrers.



**Research has shown that 14% of patients in any one year will visit their GP with a condition entirely or largely mental-health related. A quarter to a fifth of GP workload concerns mental health problems.\* One in six of the general population at any one time are experiencing mental health problems. One in a hundred are suffering from severe mental health problems. Suicide is now the second most common cause of death for those under 35. Drug expenditure on anti-depressants alone rose from £191 million to £239 million between 1996 and 1997, a 25% increase\*\*.**

**Never have mental health needs been so near the forefront of health provision, nor had such grave resource implications. Many mental health problems respond well to art therapy.**

\* Information from 'Epidemiology of mental disorder in General Practice', pub Royal College of Psychiatrists and Royal College of General Practitioners.  
\*\* DoH statistics. Full references available.

## Art Therapy: what is it?

Art therapy has much in common with the therapeutic 'talking cures'. Psychological problems are addressed at the root rather than through symptom. However, it also has the major advantage, by engaging the client with creative art making, of being able to work deeply with non-verbal areas of experience.

Self-esteem is a central aspect of mental health difficulties. Creative expression directly addresses people's capacity to experience themselves as having choices, value and meaning.

Research has repeatedly shown that time is the aspect of consultation most valued by clients. Time is just what it is most hard for many GPs to offer. Art Therapists are skilled in the healing uses of therapeutic relationship, and through this, and the creative work, are often able to help people to find their own creative and psychological resources.

Art therapy is not about 'good art' or artistic ability. All healthy children will draw, paint and model but, as adults, most of us have been taught that we 'can't' do this. Children play as part of their learning about themselves and the world. Image making is part of their adaptive process. Art therapy aims to make this natural method of psychological change available to all.

## Art Therapy and State Registration

In 1998 Art Therapy achieved State registration. It is, along with drama and music therapy, the first psychotherapy approach to do so, and is consequently better regulated and acknowledged than any other form of therapy or counselling. The creative therapies are the only psychotherapies with a formal career structure and recognition within the NHS.

This is a very tangible demonstration that in the fifty years that art therapy has been contributing to health services it has achieved a solid and professional status based on efficacy.

## Art Therapy: who is it for?

Art therapy has been successfully used for many years with a wide range of client needs. Some art therapists have specialist practices. Many Art Therapists are members of NHS multi-disciplinary teams. Areas include:

- ✓ **Work with Children and Young People.** A non-verbal creative approach can be a gentle but effective intervention with a distressed or disturbed child.
- ✓ **Work with typical mental health problems,** e.g. depression, anxiety, panic, bereavement, PTSD. These are some of the main factors in terms of pressure on GPs.
- ✓ **Work with serious mental health problems.** Art therapy evolved at least partly in the field of treatment of serious mental disorder, e.g. schizophrenia and psychosis. Many art therapists are now effectively helping to provide the resources and support necessary to keep such patients in the community.
- ✓ **Work with the Learning Disabled.** Mental health needs are particularly acute with this client group, and particularly difficult for purely verbal approaches to work with. Art therapy can give a voice to those for whom other means of communication may be limited.
- ✓ **Other areas include:** palliative care, work with offending behaviour, addiction, and mental health work with the elderly.