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Art therapists', supervisors' and school counselors' perceptions of the Substitute Art Therapist's role in the education system during maternity leave

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Plain Language Summary

Many art therapists are obliged to be absent for an extended period of time from their work. In some cases, referral of clients to a substitute therapist is important. However, replacement is complex because the essence and success of all therapeutic relationships are founded on the establishment of trust, presence and the consistency of the therapist. The issues become more challenging in the education system, where the encounter between the two languages - the educational and the therapeutic, is in any case complex. This study examined the role of art therapist substitute in the education system by focusing on the perceptions of six substitute art therapists, four art therapists who had been on maternity leave, five field supervisors who had accompanied the transition process for a substitute, and three educational counselors who also accompanied these processes. The study applied the principles of qualitative research to better characterize and understand the phenomenon of the art therapy replacement and lay an initial foundation for the creation of an effective working model for the substitution period. The findings deal with five key areas: systemic and organizational aspects of the process of replacing art therapists in educational frameworks, the actual process of replacement, professional challenges and dilemmas facing the substitute during the replacement period, the interviewees' experiences and feelings during replacement, and contributory factors and recommendations for the substitution process. The importance of appropriate procedures for the replacement of art therapists when dealing with the complexity and management of an optimal substitution process is discussed.

Abstract

Background: One of the key pillars underlying a successful outcome in psychotherapy is the personal relationship between the therapist and the client. However, when the therapist is absent for a long period of time, clients are sometimes referred to substitute therapist to maintain the continuity of the therapeutic process.

Aim: To study the participants' perceptions related to the replacement of art therapists in the educational system in Israel, in which when art therapists go on maternity leave, their clients are eligible by law to receive therapy from a replacement.

Method: Six substitute art therapists, four art therapists who had previously been on maternity leave, five supervisors, and three school counselors were interviewed on the issues related to art therapist's substitution. The interviews were analyzed according to the principles of Consensual Qualitative Research.

Results: Disparities between the education system's view of the therapist as an employee, and the art therapists themselves with respect to their therapeutic and educational role emerged as key challenges.

Implications for policy: The lack of standardized procedures and budgets makes it difficult to cope with these challenges. The discussion suggests ways to streamline this process.

Key words: Substitute Art Therapist, Education System, Maternity Leave, School art therapy, Art Therapists' Perceptions

Art therapists', supervisors' and school counselors' perceptions of the Substitute Art Therapist's role in the education system during maternity leave

In recent years there has been a growing tendency to integrate art therapists in schools (Snir et al., 2018) and concomitant interest in the field of school-based art therapy research (McDonald & Drey, 2018). In Israel, the employment conditions of these therapists are comparable to those of teachers. Women are entitled to go on maternity leave at most 11 weeks after birth, and the educational system provides a substitute therapist as it does for every other member of the teaching staff (Israel Ministry of Education, 2015). However, replacing an art therapist cannot be compared to replacing a teacher, because of the difference in the fundamental nature of their roles. This study examined perceptions and reflections of art therapists, supervisors, and school counselors with respect to the substitution of art therapists on maternity leave, as it unfolds in the Education system.

One of the central pillars of successful psychotherapy is the bond between therapist and client (Falkenstrom, et al., 2013). To enable successful therapy, what is known as the "therapeutic alliance" stresses attendance, availability, and consistency as well as the therapist's emotional connectedness to the client (Atzil-Slonim et al., 2018; Schwartz et al., 2018). When a therapist must be absent (for reasons such as sickness, pregnancy, and others), she or he evaluates the client's ability to adapt to a pause in therapy. When the client's mental state is evaluated to preclude the cessation of therapy, the client is sometimes directed to a substitute to retain the continuity of the therapeutic process (Knowlton, 2018; McGourthy, 2013). Some clinicians see the substitute therapist in these situations as a transitional object, "temporary medicine" for the pain caused by the separation (Lamb & Latona, 1989; Sarant, 1991). However, clinicians report difficulties in building a trustful relationship with the new therapist (Chairamonte, 1986; Gibb, 2004; Sarnat, 1991; Simon, 1992). The original therapist may also experience the absence as a test of his or her professionalism (Raines & Ahlman,

2004), have feelings of guilt for leaving the client in the lurch (McCluskey, 2017), or latent rivalry with the substitute (Chairmonte, 1986).

When a therapist goes on maternity leave, the mere entry of a baby to the therapeutic space may arouse feelings of envy, competition (McCluskey, 2017; Schmidt et al., 2015), and abandonment on the part of the client (Korenis & Billick, 2014; McGourty, 2013). The role of the substitute in this situation thus sometimes includes containing the client's feelings of anger and abandonment (Chairmonte, 1986; McCarty et al., 1986; McGourty, 2013), and dealing with the theme of parting (Schmidt et al., 2015).

These difficulties become more complex when therapy takes place in the education system. Along with recent evidence on the effectiveness of art therapy in the school system (e.g. Harpazi et al., 2020; McDonald et al., 2019), recent articles that have discussed the integration of arts therapies in the education system point to the complexity stemming from the integration of a therapeutic approach within an educational system. This specifically has to do with the difficulties related to the physical and systemic conditions inherent to the school framework, which are at times incompatible with a therapeutic approach (Glassman & Prasad, 2013; Snir et al., 2018).

Despite the complexity of the substitution process in psychotherapy and its importance, there is scant literature on its management and significance in the psychotherapy literature in general, in work with children, and in the field of art therapy in schools in particular. The current study thus constitutes a preliminary exploration aimed at better circumscribing the perceptions, viewpoints, and experiences of art therapists going on maternity leave, substitutes, supervisors, and educational counselors with respect to the process of the replacement of art therapists in the educational system.

Method

This qualitative research was conducted according to the principles of the "CQR: Consensual Qualitative Research " (Hill et al., 1997). This approach relies on phenomenological components that attach importance to the examination of human experience and helps to deeply understand the phenomenon being studied from the premise that there is no absolute truth, but only many interpretations of reality. At the same time, it has positivist foundations mainly in trying to reach a consensus between a group of at least three researchers (Hill et al., 2005).

Participants

The sample was composed of 18 women aged 31-62 (M=46), six of whom were substitute art therapists, four of whom were therapists on maternity leave, five supervisors, and three educational counselors in charge of school transitional processes in cases of maternity leave. The participants were located by the researcher using a purposeful sample (Emmel, 2013) by searching for participants who fell into these four categories.

The participants worked in schools across the country, and except one from the Arab educational system all were from the Jewish educational system. The purpose of school art therapy in Israeli is define by the ministry of education, to help and facilitate the student's adaptation to the educational framework, and to reduce the emotional barriers that hinder him in learning the skills he needs to participate in the learning and other school activities. Art therapists in the education system are expected to be proficient in treatment approaches that focus on the student's needs and inner world - intrapersonal approaches and systemic in therapy approaches that address the contexts in which the student functions and conducts - interpersonal approaches, and combine them to suit student needs and therapeutic goals (Israel Ministry of Education, 2015). The demographic data appear in Table 1, in a way that characterizes the participants while preserving anonymity.

Insert Table 1 around here

In-depth semi-structured interviews

The data were obtained from in-depth semi-structured interviews (Hill, 2015) designed to probe the interviewees' subjective viewpoints. The first part of the interview dealt with the interviewees' background. The second part encouraged the interviewees to talk freely about their experiences and perceptions of the substitute's role and specifically that of the art therapy substitute in the educational system. The interviewees were also asked to describe the advantages and disadvantages of substitution, their experiences with therapy substitution, and their opinion as to how to manage the transition. In the third part, the interviewees were asked to make recommendations concerning the management of the substitution process including topics not touched upon in the interview.

Procedure

The participants were invited to take part by regional supervisors in the Ministry of Education and by addressing the heads of educational frameworks in regions all over Israel. The interviews lasted 45 minutes to an hour. They were recorded and transcribed after obtaining the participants' written consent.

Data analysis

Data analysis adhered to the "Consensual Qualitative Research" (CQR, Hill, 2015) paradigm. In the first stage, one interview from each of the four sub-groups was chosen randomly and analyzed separately by each of the judges, to identify central domains emerging from the data. Then, the judges met to reach a consensus on the definition of the domains. Subsequently, the remainder of the interviews were categorized according to these domains. While working on this process, changes and adjustments were made until the domains could be formulated. This was followed by a division of the domains into core ideas by each one of the judges separately, followed by another group meeting to reach a

consensus. In the final stage, all interviews were analyzed according to the domains and core ideas defined in the consensus stage by the first writer.

Ethics and confidentiality

Participants signed a consent form. Due to the sensitivity of the information related to the work environment of the interviewees, confidentiality and anonymity were carefully protected. This study was approved by the Chief Scientist's Office at the Ministry of Education and by the Ethics Committee of the Faculty of Social Welfare and Health and Sciences at University of Haifa.

Results

The domains and the core ideas defined in the interview analysis process are presented in this section (see Table 2).

Insert Table 2 about here

Systemic aspects influencing art therapist substitution

The existing procedures do not meet all the substitution needs

Since the Ministry of Education does not pay for on-the-job training, substitutes can only be paid after the therapist takes an authorized leave of absence. Supervisors stated that for this reason they can only plan the replacement at the last moment. Since the date of birth is unknown, and can many times be other than planned, these unpredictable gaps make it difficult to find a replacement and provide some preparatory training days. The return date from maternity leave is not set in advance, since new mothers can extend their maternity leave or return earlier, making the end of the substitution undefined: "It's impossible to plan in advance. One therapist says that she is going to come back in three months and in fact does so, but another intends to return after three months, but does not." (supervisor 1) Finding substitutes becomes more complex when the school needs the replacement to fill the exact time slots as the absent therapist, which may clash with the substitute's other commitments.

The bureaucratic procedures involved in registering art therapists for positions in the Ministry of Education, which requires a variety of certificates of approval, was also reported to be a delay factor when planning for a replacement.

Substitution as a preliminary evaluation process in obtaining a permanent position

Alongside the complexity described above, certain art therapists want to apply to the Ministry of Education system as substitute therapists. The interviewees mentioned that substitution is often the first step to obtaining a permanent position as a school art therapist: "I tried to apply to be a school art therapist for two years... being a substitute was the best way to get in." (substitute 4) The educational system also uses this period to evaluate the substitute's abilities to cope with the challenges of the job. As one supervisor noted: "This is a very good way to do an 'extended interview' in preparation for hiring." (supervisor 1)

The handover from the interviewees' point of view

Frustration among therapists on maternity leave at not being able to do the best for their clients

The therapists going on leave stated that they only had contact with the substitute close to their departure date, while they were busy writing reports, therapy summaries, parting from clients, and having summary conversations with parents. This was combined with the excitement and implications of the impending birth in their own lives which meant they could not always be fully available to respond to the needs of the substitute: "The delivery came early and I thought that I would be able to finish writing the summary reports after the birth, but no, I was in a completely different mindset." (therapist on maternity leave 1)

A number of therapists going on leave reported that the search for a substitute took time because of technical problems. They had to meet with several potential substitutes, and at times described their clients several times, if the potential replacements could not take the

job in the end because of scheduling or other problems: "Several potential substitutes spoke to me, and with some of them it didn't work out because of the dates, and I found myself having to talk about the clients each time in a general way." (therapist on maternity leave 2)

The therapists going on leave dealt with the problem of providing information about their clients to the substitute in different ways. In cases where a substitute had not been found and the therapist was about to go on maternity leave, some therapists designated a third party from the school system to be sure that the information would be conveyed to the substitute. Some left the reports about clients with the school staff, while others wrote another personal document to provide information while preserving the clients' privacy: "I prepared an 'off the record' report in which I said what was right or wrong in my opinion for each client." (therapist on maternity leave 1) Some therapists mentioned that on-the-job-training took place on the phone while they were already on maternity leave: "actually all on-the-job-training was on the phone, we didn't meet... and not the way I would like to be replaced." (therapist on maternity leave 4)

The handover is perceived as too short and not professional enough from the substitutes' perspective

Similarly, the substitutes also described the on-the-job-training as a short and shallow process. Some substitutes did not meet the departing therapists at all, and at other times, the therapists were not available to respond to them when they tried to make contact: "The second therapist I replaced, I didn't manage to see at all." (substitute 4) Like those going on leave, the substitutes also related to the fact that they were expected to meet with the departing therapist at their own expense, and some described how hard it was to find time when they both could meet so that in the end the handover took place on the phone, which was experienced as unsatisfactory for everyone involved: "she tried to give me everything but it can't be conveyed on the phone, it wasn't complete, it wasn't enough for me." (substitute 1)

Some substitutes mentioned that the start of the process was rough because they did not know how "the system works." Some had never worked in the educational system before and had trouble understanding basic concepts such as how to write reports, and get along in the system: "The most appropriate thing is to convey all information in advance and not to suppose that everybody knows everything and that somehow you will get along." (substitute 1)

The substitutes mentioned that getting familiarized with the clients was not been part of the handover before the therapist left, and that the therapist was often not present at school during the transition. The substitutes needed to depend on the staff and counselors at the beginning of therapy sessions to get specific information on clients. On the other hand, they also described instances in which the principal initiated a multi-professional meeting: "It was very professional and I realized the importance of integrating the substitute into the workplace." (substitute 3)

The handover from the supervisors' perspective is rarely structured or adequate

A number of supervisors felt that the on-the-job-training was too brief and did not go into sufficient depth. A structured process, including a meeting between the departing therapist and the incoming one was rare: "In most cases, if they manage to meet once it is exceptional (supervisor 2)." Others mentioned that they insist on having the therapists going on maternity leave coordinate a handover meeting to inform the substitute about the clients, and sometimes request the educational staff to be present. Often, however, the handover, depends on the readiness and goodwill of the therapists to invest their private time.

Certain supervisors said they accompany the substitutes themselves during the on-the-job-training process so that the new substitute art therapists can get acquainted with the educational staff. The supervisors also sometimes helped the substitutes structure a therapy

intervention program for each framework: "I meet with them for very close accompaniment, more than I would do for any other therapist" (supervisor 5).

The counselors serve as mediators during the handover

The counselors described their role as being the mediator person for issues such as technical coordination of art therapy days, therapy rooms, and student's therapy arrangements. In fact, most counselors helped arrange for the substitutes and teachers to meet and discuss clients when there was insufficient handover: "I was the coordinator for the educational staff and also for the students." (counselor 2). The counselors arranged meetings where the substitute could get background information on the students: "The substitute attended staff meetings right from the beginning." (counselor 1).

Professional challenges and dilemmas facing the substitute during the replacement period

Should the replacement be seen as a new therapy, or the continuation of the old one?

Some of the interviewees stated that the substitute job gave rise to a dilemma related to the essence of replacement; namely, is this a new therapy or a continuation of the old therapy? Certain supervisors mentioned that this dilemma also reflected a clash between the educational language, which is concerned with the continuation of therapy with minimal changes, and the therapeutic language which relates to each therapy as a separate unit, requiring a renewed approach and a reorganization of the aims of therapy: "This is an entirely new therapy from the moment there is a substitute, but, from the viewpoint of the system it is the same because there is a substitute art therapist and it isn't an entirely new therapy." (substitute 1).

Does short term therapy suit all clients?

Some substitutes expressed their concern that short term therapies may recreate traumas from the clients' past, and that the lack of matching expectations between all the

professionals involved can be damaging to clients: "The children get used to a new person but when beginning therapy they already need to consider upcoming separation." (substitute 1). Some also related to the difficulty of planning the separation when the substitution time frame is unknown and may change due to the early return of the departed therapist: "There is a time for separation but it isn't always known in advance." (supervisor 3).

Challenges related to working in conjunction with the educational staff during the replacement: comparisons, tensions and confusion

Some substitutes mentioned comparisons made by the educational staff, and tensions resulting from not always being listened to: "There was a very challenging feeling... you are the substitute, and you are supposed to do what the other therapist did but this is not possible." (substitute 4). Some said that they did not try to change the way the therapy was conducted and did what the staff requested, despite thinking that there was more compatible content.

Some supervisors described situations in which the educational staff expected substitutes to take on obligations that were not part of their job profiles as art therapists. They claimed that the system sometimes took advantage of the confusion at the start of replacement to assign clients who were not entitled to therapy, by taking advantage of the substitute's desire to please the system: "The fact that the substitute did not know who is entitled to therapy was taken advantage of." (supervisor 1).

Integrating art therapy in the educational system during replacement intensifies the need to cope with challenges

The supervisors described the integration of art therapists in the school as challenging at times and stated that this was intensified when there was a replacement. Some supervisors reported a lack of understanding of the therapist's job on the part of the school system and described incidents in which the staff assigned an art teacher to replace the art therapist on

maternity leave, thinking that there was no difference between the two: "From their viewpoint, the main thing is that these children will not be troublemakers in class." (supervisor 3).

The substitutes reported Ethical issues, when they were pressured by the system to begin therapies before parents signed consent forms for the replacement, without having read reports, observed the students, or without having met the parents for intake: "The system already wants her to accept children." (supervisor 1). Some substitutes said that in the substitution period, during therapies, essential themes arose that made them unsure whether they should report information about clients or not: "Within the therapeutic process many difficult things came out and what I decided to do was to write an interim report, and give it to the principal, and recommend letting child welfare (officials) into the picture." (substitute 1).

It is not always possible to assign a substitute from the same modality of art therapy. Among supervisors, some described the change in the substitute modality as a positive thing, that helped differentiate between the two therapists. Some substitutes described a similar situation, in which they replaced a school therapist with different training and thus could not continue therapy in the same way, although this was the expectation of the staff: "I replaced a therapist who had training that I did not have... and they liked the sessions very much... but I couldn't continue it... ". (substitute 4).

Challenges related to the clients' difficulties with the transition: accepting the change and creating a therapeutic alliance

Some substitutes said that they experienced difficulties with clients who had problems making contact with them and wanted the old therapist back: "I experienced many silent therapy periods in which the client wanted to do nothing." (substitute 4). Some supervisors and counselors discussed cases where replacement was not accepted by the clients, because

of difficulties they experienced to adjust to the new therapist. This issue is especially complex for clients whose parents exert pressure to get a replacement, since their children are entitled to therapy: "It is especially difficult for children diagnosed with Asperger syndrome to try to change their habits and when they have a new therapist it is more difficult for them to adjust to changes." (substitute 6).

Experiences and feelings of the interviewees during replacement

Experiences of concern, guilt, envy and sometimes relief among therapists going on maternity leave during the replacement period

Therapists on leave described having experienced concerns related to taking the maternity leave, along with guilt feelings for having to leave their clients during the therapeutic process. In cases when the birth came earlier and they were unable to part from the client and prepare them for the substitute, the feelings of guilt were intensified. Some described the pregnancy and the upcoming separation as a flooding experience for them, because of their clients' responses to the pregnancy that ranged from wonder, happiness, and sometimes even anger, along with 'acting out' responses and separation anxiety. The departing therapists said that finding the substitute imbued them with a feeling of relief because, despite clients' separation anxiety, they could still continue therapy: "I would like there to be a replacement mainly for the children and homeroom teachers." (therapist on maternity leave 4).

Some of the departing therapists described feelings of envy and rivalry resulting from comparisons between them and the substitute: "There is something deep in you wanting your substitute to be good but not too good... " (therapist on maternity leave 2). Some expressed concerns about a situation in which the substitute would be successfully integrated and would be kept on at the school and they would be assigned to a new school: "I have heard of cases

in which the therapist came back, but not necessarily to her previous position." (therapist on maternity leave 4).

Experiences of mixed feelings among substitutes during the substitution

The substitutes described experiencing mixed feelings about replacement. They talked about having been able to experience it from a mature place in which they were aware of the essence of the processes they underwent as substitutes, but at other times experienced strong emotions such as betrayal, abandonment, and manipulation: "In the end, I had a good experience, but if I consider myself as a human being and not as a therapist, I am still feeling frustrated and though I was like a Band-Aid that was thrown out after being used." (substitute 1). The substitutes described the lack of certainty as to the departure and return dates of the departing therapist as a source of frustration. Some said that they sometimes felt anger towards the departing therapist and towards the system for allowing the departing therapist to suddenly change the return date and be inconsiderate of the clients and their needs, whereas the substitute is regarded by the system as temporary, and dispensable: "I felt cheated and as though I was being evicted. I am not this type of person and it was a very new experience for me." (substitute 2).

Some substitutes felt a sense of alienation and damage to their self-image when they thought that the staff 'was faithful' to the departing therapist. They also had to deal with the feeling that they were constantly being compared to the departing therapist, which gave them a 'shaky' self-image. Similarly, some substitutes described cases in which clients were disappointed with them when they did not act exactly the way their old therapist did, saying: "But the other therapist did that." (substitute 1).

Some substitutes described the separation from the clients as a flooding experience accompanied by concern for students with whom a deep therapeutic bond had been formed: "I was very sad to separate from the children and staff, we had a very good connection."

(substitute 6). More experienced substitutes described themselves as prepared and directed towards the separation process and reminded the clients that the therapist would soon return from maternity leave, pointing out that: "You also loved her very much." (substitute 3).

Nevertheless, the substitutes described their work with clients as a source of much satisfaction and commented that when they exited the therapy room all their frustrations were left behind and that the connections with clients were primarily positive and beneficial. Some of them felt satisfaction from merely being 'a good enough mother' doing all she could to enable these students to have a safe place that helps them not to feel the absence of their former therapist.

Supervisors are called upon to deal with complexity in managing the replacement

Supervisors described their role in managing the substitution as complex, because it involved the educational staff, the substitute, and the departing therapist, each of whom has specific requirements and wishes. They said these conflicts made them feel uneasy, because they had to 'walk on thin ice' to respond to the requirements of the system while insisting on principles related to the key notions guiding therapy: "It is difficult to please all parties and there is always one party that isn't satisfied." (supervisor 2).

Certain supervisors stated they felt guilt and disappointment when the substitute art therapist did not fit in or was not integrated and they had to end their relationship with him/her. In other cases they were frustrated because although the replacement was successful and the system wanted him/her to stay, they had to part with him/her to allow the permanent therapist to return: "I felt I had exploited her, we used her and then dumped her…. We let her go." (supervisor 3).

Experiences of counselors during the replacement: work overload gives the students the top priority and not the substitute's needs

Some counselors reported feeling pity for the substitute when the staff was not willing to accept him/her, and at times felt they had not made a sufficient effort to make sure that the staff would welcome the replacement. In other cases, they felt a grudge against substitutes who wanted to change the status quo. Some said that sometimes they were annoyed when the substitutes needed containment and support, since their role as counselors is first and foremost to deal with students' difficulties: "It isn't pleasant for me to say, but when there are emergencies, it isn't a top priority to support the substitute." (counselor 3). On the other hand, some described an entirely different experience, and said that the integration of the substitute was very positive for them and the staff and made a contribution: "There was mutuality in the work, and that is the reason why it succeeded." (counselor 1).

Some counselors mentioned that they felt frustrated when the supervisors did not take responsibility for the substitution process, since in this case it was all placed on the shoulders of the counselor. Other counselors said that in cases in which the supervisor was very involved in the replacement and finding a substitute on time, they had a different and much more positive feeling.

Contributory factors and recommendations for the substitution process

Contributory factors related to the system: structured processes and resources are needed

Supervisors related to the substitute's number of assignments as a factor that influence him/her success or failure. Some mentioned that when the substitute works in too many places, he/she cannot remain long enough at each school during the day to develop a relationship with the staff, thus impeding his/her ability to work optimally. They recommended assigning the substitutes a third- or half-time position. Some interviewees thought that early preparation for the replacement and prior coordination between all authorities would constitute a significant factor in ensuring the success of the substitute's ability to take over: "It is important to decide in advance who the substitute is, how many

hours she will be allotted, and to coordinate between all authorities." (supervisor 4). Some supervisors and substitutes described the attendance and guidance of the supervisor throughout the substitution process as a contributory factor: "Much guidance and support are needed... to accompany her and not to let her feel alone." (supervisor 5). Some supervisors even recommended setting up a short-term therapy program with the substitutes that would be adjusted to the educational framework to which they would be assigned. The interviewees also mentioned the absence of a structured on-the-job-training process and recommended allocating resources for this: "My first recommendation is that there should be time and funds for on-the-job-training." (supervisor 3).

The educational staff should take responsibility and be more involved in the process

Some of the replacement art therapists stated that when the staff took responsibility and made personal and professional contact with them, they felt more welcomed, which contributed to their integration in the system: "The interaction is very important, the substitute should feel welcome and that the staff cares about her. Someone in the school must be responsible for that." (supervisor 5).

Contributory factors related to the departing therapist: early planning is crucial

Some of the departing therapists said that early planning before going on maternity leave is crucial for the on-the-job-training process. Other departing therapists mentioned that since the birth date can change, it is worthwhile preparing in advance to be able to leave the summary reports for the substitute: "It is important to try to have orderly files, to be deliberate about on-the-job-training." (supervisor 1). Some recommended that the departing therapist should prepare the staff for the replacement and explain the importance of helping the substitute so that she can work in better conditions.

Some of the interviewees recommended considering the advantages and disadvantages of replacement when the absence will be short, and not hiring a substitute for

the last three months of the school year or when the total leave is only three months: "If there are only three months before the end of the year, I think this is a borderline case, no replacement should be made here." (supervisor 2).

Contributory factors related to the substitute: previous experience, responsibility and flexibility

Some of the substitutes mentioned that there is a significant advantage in having previous experience with the population, and experience with the specific setting to which they are assigned: "I was a kindergarten teacher previously... and this helped me very much during the replacement in the kindergarten." (substitute 1).

Some supervisors stated that there were multiple advantages to having a replacement drawn from a current member of the therapy staff in the school: "If this is a substitute from the staff who is acquainted with the school and with my (the supervisor's) approach and the work of the departing therapist, it helps a lot." (supervisor 3). Others recommended building up a pool of experienced art therapists from the system from which substitute therapists could be selected and assigned: "I would like there to be a pool of permanent substitutes I know I can rely on, and know that they have the proper skills." (supervisor 5).

Some of the interviewees cited "seriousness" and "responsibility" as personal traits substitutes should ideally have to better carry out their obligations and integrate into the system. They also mentioned certain abilities and skills that contributed to their coping with the complexities of the job such as good communication skills, the ability to compromise, and flexibility. Some substitutes thought that these personal skills and traits can enable the substitute to "put her ego aside" and understand that during replacement she cannot be in the center of things.

Discussion

This study explored the replacement of art therapists going on maternity leave. The findings showed that the disparity between the educational system's perception of the therapist as comparable to the replacement of teaching staff, and the therapist's perception of the job entailed numerous challenges for the substitute art therapist. The interviewees stated that this disparity directly influenced perceptions of the role of the substitute, the substitution process, and planning for the substitute's integration by the educational system. These results contribute to previous research describing conflicts surrounding the definition of the art therapist's role, and the lack of consensus as to the definition of the conditions and environment needed for art therapy to take place (Snir et al., 2018). The results suggest that despite the educational system's acknowledgment of the importance of the substitution process, the substitute and the clients' needs are at times not fully understood. While the educational approach generally wants substitutes to take up where the departing therapist left off, the therapeutic approach sees replacement as a 'new' therapy requiring thinking and adjustment of the therapeutic aims and allotment of time to develop the therapeutic bond resulting from the therapeutic relationship between therapist and client.

One of the key examples of disparities in views between the therapeutic approach and the educational approach is the lack of specific procedures in the educational system addressing the needs of art therapy. As a result, the on-the-job-training stage is not considered an integral part of the substitute's duties, and the Ministry of Education does not fund on-the-job-training hours but rather expects the handover to take place in the replacement's own time. This makes the actual process of substitution difficult since sometimes substitutes do not meet staff or clients and are not presented to the educational framework before starting the job. Other difficulties that arose from this absence of suitable procedures stemmed from the inability to set defined dates for substitution in advance, since the departing therapists are entitled to change the date of their return from maternity leave. In case studies in the

literature, clinicians mention the importance of early preparation on the part of the departing therapist that include setting substitution dates in advance to facilitate the change (McCarty et al., 1986; Sarnat, 1991; Simon,1992). This also helps the clients and the substitute to cope with forced termination of therapy (Hudgins, 2013), but do not take place in the Israeli educational system.

In light of the disparities between the educational and the therapeutic approaches substitutes must cope with dilemmas and professional challenges related to their temporary status in a system that does not always understand their work. Substitutes must cope with difficulties when defining therapeutic aims that are suitable to their clients' needs during the substitution, often without being able to have prior consultation with the educational staff. Our findings showed that despite the importance of teamwork (Snir et al., 2018), the educational staff was at times not open to welcoming the substitute as part of the team, and could fail to understand her needs, or listen to her professional opinion on subjects related to the client. In an earlier study we noted similar difficulties and described situations in which forging cooperation with therapists demands investment of the educational staff's personal time and is sometimes based on personal connections (Keinan et al., 2016), which is more complex when the therapist is temporary in the system.

Another challenge relates to the setting, where suitable rooms, equipment, storage for keeping artworks and preserving client privacy during therapy are often lacking (Moriya, 2006). Research findings have shown that substitute therapists sometimes need to compromise on these requirements since they are 'momentary guests,' may be unfamiliar with the system and the educational staff, and may perceive the substitution as a 'test period,' to be used as an opportunity to prove themselves, and then be hired in the school system.

Given these considerations, a dilemma arises as to the advantages of substitution for the client, since in the opinion of the interviewees there were times where, due to the

frequency and duration of the substitutions and the need to work part of the time with a short-term model of therapy, not all clients benefitted from the substitution. Similarly, a meta-analysis that examined the efficiency of short term therapy in children and adolescents in mental health institutions found that the value of short term therapy should be evaluated both ethically and in practical terms (Abbas et al., 2013). The interviewees noted that the separation experience could reconstruct a past trauma, and coping with loss for certain clients.

In many cases, the interviewees experienced feelings of frustration and uncertainty as a result of the disparities between the languages and the unfolding of the substitution. Similar to the experiences reported in clinicians' descriptions (Chairamonte, 1986), the findings showed that substitute duty can involve coping with frustrations and feelings of envy and rivalry with the departing therapist and frustrations related to comparisons between therapists made by clients. Unlike clinicians who defined the role of the substitute as a 'bridge' or 'transitional object' (Lamb & Latona, 1989), the substitutes used the term 'a band aid' that was discarded when the system stopped needing it.

The interviewees' recommendations can be classified into two key areas. Professionally, the departing therapists should prepare therapy summaries, complete client sessions files, or meet with the substitute before leaving to enable the replacement to have greater chances of success. The substitutes recommended holding at least one joint session with clients aimed at acquainting the client with the substitute, similar to clinicians' recommendations who view early co-therapy sessions (the departing therapist and the substitute) as an opportunity to prepare the client for the transition (Chairamonte, 1986; Gibb, 2004; McCarty et al., 1986; Sarnat, 1991). Time should also be allotted to meet and prepare the educational staff before the arrival of the substitute while emphasizing matching expectations and setting up a channel of communication. Systemically, the interviewees

recommended that the position of the substitute be part-time (one third to one half position) so that the substitute would not be called upon to work in numerous locations. Furthermore, the importance of a meeting between all the participants involved officially to coordinate expectations was emphasized, to discuss therapeutic goals, adjust them to the substitution period and make sure the proper conditions for therapy are present in the school. Although in some cases the change in modality contributed to difficulties in substitution, certain clients benefitted from this change. This underscores the need for early discussions concerning the adjustment of the change in modality to the client. Due to the complexity of the substitute's job, a framework for guidance needs to be defined so that they will be responsive to the needs of the substitute. In this context, cooperation between the supervisor, the departing therapist, and the substitute before departure on maternity leave is crucial, to diminish feelings of uncertainty and frustration. Substitutes who had prior experience with substitutions were better aware of the challenges entailed by short term therapy and the consequences for the client. Since older therapists are more experienced, a substitute pool of available therapists should be created.

Limitations and recommendations for future research

This preliminary study describes the complexity of the substitution process through the eyes of the interviewees and presents a range of factors influencing replacement as they emerged from the analysis of the perceptions and experiences of the interviewees.

The sample was only composed of a few small subgroups, which precludes generalization. In addition, it was conducted in Israel, and even within the country not all sectors were represented (e.g., the religious sector in Israel, which has a relatively high percentage of births, with more widespread substitution), and thus may not represent the entire population of substitutes in the educational system in Israel. Furthermore, the viewpoint of the clients themselves, and the way the substitution influenced their own

experiences were not dealt with. Future research should include a broader sample, representing more cultures from different countries. Repeated interviews at different time points would also be valuable, such as before, during and after substitution, and could lead to a better picture of the unfolding of the substitution process and how the substitution was experienced and influenced the participants. Further research could also examine the replacement of arts therapists in additional institutions where a different treatment setting and a different system exist, such as hospitals or treatment centers.

Conclusions

The findings highlighted the need to devise a working model based on the therapeutic language and adjusted to education system constraints. This type of program should consider the clients' needs, and draw up criteria for the benefits of replacements as a function of the time in the school year, the duration of substitution, seniority of the substitute, the educational staff, adjustment of therapeutic modalities and client background. Early planning, along with explanations to the educational staff are key to better integration of substitutes and enabling them to become part of the educational team. A training course for substitutes that would prepare them for the complexity of the job would also be beneficial.

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Declaration of interest statement

The authors declare that this study was conducted in the absence of any commercial or financial relationships that could be construed as a potential conflict of interest.

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Table 1

Participants' Demographic Information

#	Position	Age	Level of Education	Years on the job	Duration of substitution	Percent of Employment	Educational framework
1	Substitute	31-40	MA	0-5	6 months	14 weekly hours	Kindergarten
2	Substitute	51-60	MA	6-10	Two months	10 weekly hours	Elementary school
3	Substitute	31-40	MA	0-5	Five months	60%	Elementary school
4	Substitute	31-40	MAAT+BED	11-15	Three months	60%	Elementary school
5	Substitute	41-50	MA	6-10	Five months	60%	Junior high
6	Substitute	31-40	MA	0-5	6 months 3 months	100%	Special education junior high school
7	Therapist on maternity leave	31-40	MA	0-5	Five months	45%	Elementary school
8	Therapist on maternity leave	41-50	MA	11-15	Three months	90%	Junior high
9	Therapist on maternity leave	41-50	BED+ therapist diploma	16 and upwards	Two months	60%	Elementary school
10	Therapist on maternity leave	31-40	MA	0-5	Five months	14 weekly hours	Kindergarten
11	Supervisors	51-60	MA	16 and upwards	-	85%	SRSC[1]
12	Supervisors	61-65	MA	16 and upwards	-	100%	SRSC

[1] SRSC=Settlement or Regional Support Center

13	Supervisors	51-60	PhD	16 and upwards	-	100%	SRSC
14	Supervisors	61-65	MA	16 and upwards	-	100%	SRSC
15	Supervisors	41-50	PhD	16 and upwards	-	100%	SRSC
16	Educational counselor	41-50	MA	16 and upwards	-	100%	Junior high
17	Educational counselor	41-50	MA	16 and upwards	-	100%	Elementary school
18	Educational counselor	51-60	MA	16 and upwards	-	100%	Elementary school

Table 2

Participants' perceptions: Domains and Core Ideas

Systemic aspects influencing art therapist substitution	**The handover from the interviewees' point of view**	**Professional challenges and dilemmas facing the substitute during the replacement period**	**Experiences and feelings of the interviewees during replacement**	**Contributory factors and recommendations for the substitution process**
The existing procedures do not meet all the substitution needs	Frustration among therapists on maternity leave at not being able to do the best for their clients	Should the replacement be seen as a new therapy, or the continuation of the old one?	Experiences of concern, guilt, envy and sometimes relief among therapists going on maternity leave during the replacement period	Contributory factors related to the system: structured processes and resources are needed
Substitution as a preliminary evaluation process in obtaining a permanent position	The handover is perceived as too short and not professional enough from the substitutes' perspective	Does short term therapy suit all clients?	Experiences of mixed feelings among substitutes during the substitution	The educational staff should take responsibility and be more involved in the process
	The handover from the supervisors' perspective is rarely structured or adequate	Challenges related to working in conjunction with the educational staff during the replacement: comparisons, tensions and confusion	Supervisors are called upon to deal with complexity in managing the replacement	Contributory factors related to the departing therapist: early planning is crucial
	The counselors serve as mediators during the handover	Integrating art therapy in the educational system during replacement intensifies the need to cope with challenges	Experiences of counselors during the replacement: work overload gives the students the top priority and not the substitute's needs	Contributory factors related to the substitute: previous experience, responsibility and flexibility
		Challenges related to the clients' difficulties with the transition: accepting the change and creating a therapeutic alliance		