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Supervisors' Perceptions of Art Therapy in the Israeli Education System

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Abstract

Art therapy has considerable advantages when treating children, and is regularly made available as a form of therapy in schools. In Israel, the Ministry of Education is now the largest employer of art therapists, but the synergy between the education system and therapy is challenging and complex (Regev, Green-Orlovich & Snir, 2015). This study examined supervisors' perception of the role of art therapy in the school system. Fifteen interviews were conducted with art therapy supervisors employed by the Ministry of Education using Hill's "Consensual Qualitative Research" (CQR) analysis method (2012). Four primary domains emerged from the findings as formulated by the supervisors: 1. The benefits of using art therapy in the school system. 2. The difficulties arising from the presence of art therapy in the school system. 3. The setting and the benefits versus the challenges of supervision. 4. Suggestions for better integration of art therapy into the school system.

Keywords – art therapy, educational system, schools, supervisors, Consensual Qualitative Research.

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Art therapy is one of the most popular forms of emotional therapy in schools in Israel and around the world. Randick and Dermer (2013) noted that art therapy has been an integral part of the emotional support system available to children in schools in the United States since the 1990s. Art therapy has been found to drastically improve self-esteem and self-confidence (Sassen, Spencer & Curtin, 2005), enhance learning abilities by reducing anxiety levels (Spier, 2010), help develop social skills (Lenz, Holman & Dominguez, 2010), allow for the expression of emotions and the achievement of personal insights (Gladding, 2011), allow for group socialization and collaboration (Gibbons, 2010), and increase the sense of belonging (Sutherland, Waldman & Collins, 2010).

In Israel, like in other countries, the rate of employment of art therapists in regular education and special education frameworks is growing. The Ministry of Education in Israel has allocated resources and efforts to integrating emotional therapy into schools through Regional Community Support Centers (RCSC), and by developing and implementing various projects and programs designed to increase systematic assistance to children with special needs.

Nevertheless, the integration of art therapy in the school system has both advantages and disadvantages. In recent years, a number of therapists have begun to document the complexities of their work as art therapists in schools (French & Klein, 2012; Glassman & Prasad, 2013). These therapists are motivated by the fact that the integration of art therapy in educational systems around the world is complex, and it is important to learn from and integrate the lessons learned from other countries. A preliminary study (Regev, Green-Orlovich & Snir, 2015; Wengrower, 2001) described the way in which Israeli art therapists perceive the pros and cons of working within the

educational system. The therapists highlighted two key benefits. The first is the ability to uphold therapy within an external system and collaborate with various entities in the life of a child in therapy. Second, presence of therapy in the school makes the service accessible to populations from lower socio-economic backgrounds, or to children whose parents find it difficult to take an active role in the therapeutic process. At the same time, the therapists identified six main difficulties: 1. Difficulties related to the physical working conditions, such as the provision of therapy rooms that are not suitable for therapy and the lack of adequate art materials. 2. Problems in maintaining client privacy and creating a safe therapeutic space within the educational system. 3. Problems maintaining a regular and consistent schedule for therapy in the educational framework, due to multiple school events and annual holidays. 4. Obstacles to effective communication with staff members due to the workload of both teachers and therapists. 5. Problems maintaining a relationship with parents of children who are seen at school. 6. Issues related to the position of art therapists in Israel, who are often employed by a number of educational facilities simultaneously and find it hard to meet the needs and demands of all workplaces.

As can be seen from this literature review, studies have dealt with the integration into the educational system of counselors and psychologists (for example, Castillo, Curtis & Gelley, 2012; Cooper, 2013). Nevertheless, in the field of arts therapists, most of the written material is only theoretical. The current study, which is a part of a broader project exploring the perceptions of art therapists (Regev, Green-Orlovich & Snir, 2015), supervisors, homeroom teachers (Keinan, Snir & Regev, accepted for publication), counselors, and principals concerning the role and place of art therapists in the Israeli

education system, presents a different viewpoint on the complex work of art therapists in the school system by looking at art therapists' supervisors. Supervisors have a broader and more comprehensive grasp of fieldwork, and can draw on their experience and encounters with many different art therapists as well as with educators and principals. Because of their position in the Ministry of Education, supervisors can see art therapists' as well as principals' viewpoints. This study focuses on the current situation in Israel and examines the ways in which supervisors perceive art therapy as it is currently implemented in the school system.

Method

The research method used in this study is based on CQR (Consensual Qualitative Research) which was initially developed by Hill, Thompson and Williams (1997). The CQR integrates a number of qualitative approaches that explore the perceptions of individual participants and also captures group-level ideas and outcomes. This is done by working with multiple evaluators and reaching a consensus about core ideas (Hill, 2012). The CQR generates descriptions that are clear, unambiguous and less biased, and for this reason is frequently used in psychotherapy research and in counseling psychology in general (Daniels, Angleman, & Grinnan, 2015; Ladislav, 2012).

Participants

This study was based on interviews with 15 art therapy supervisors who work for the Ministry of Education. The participants, all of whom are experienced supervisors, were selected based on guidelines for theoretical sampling (Hood, 2007; Patton, 2015). Most of the participants are art therapists (12), a small number are either dance, music or drama therapists (3), but all of the supervisors oversee and facilitate visual art therapists

(see Table 1). The number of years of supervision experience ranges from 1 to18 years (M = 8.13).

Insert Table 1

Assessment Tools

The data were collected using semi-structured interviews (Hill et al., 2005). The interview consisted of three phases and was conducted according to the interview guide. In the first phase, the supervisors introduced themselves, and talked about their experiences as therapists and supervisors. They also presented the therapists who are currently under their supervision and the population with which they work. In the second phase, the supervisors described the physical conditions in which the therapists work in the various frameworks under the Ministry of Education. They also described the nature of their relationships with the educational staff and parents of clients, as well as the advantages and disadvantages of their work. In addition, they were asked about the advantages and disadvantages of the supervision process. In the third phase, the interviewees were asked to think about the factors contributing to the work conditions and how to improve the current conditions in the field.

Procedure

Initially, the researchers approached supervisors they knew personally. In the next stage, a "snowball" sampling method was used whereby participants referred other suitable participants who met the research criteria. In addition, a special request was sent to an expert and a senior member at the Ministry of Education to recommend other supervisors for the study. The goals and nature of the study were presented in a preliminary telephone conversation. Then a meeting was scheduled to conduct the

interview, usually at the participant's home or place of work, or according to their preferences.

The supervisors all agreed to the terms and purposes of the research and signed a consent form. The researchers guaranteed privacy. The interviews were recorded and transcribed. The study was approved by the Ethics Committee of the Faculty of Social Welfare and Health Sciences at the University of Haifa, and by the Office of the Chief Scientist of the Israeli Ministry of Education.

Data Analysis

In the first stage of the data analysis, and according to the Consensual Qualitative Research (CQR) method, three interviews were analyzed separately by three different evaluators. This served to gather multiple perspectives on the main issues that arose in the interviews and the domains and core ideas within them. The next stage involved a consensus process during which the evaluators combined their ideas based on the meaning of the data. An external auditor examined the data to identify biases that may have been created during the consensus process. In the next stage, the remainder of the interviews was analyzed by the first author using the structure resulting from the consensus process. Additionally, a cross-analysis was conducted comparing the interview content (Hill et al., 2005).

In the description of the findings below, the phrase "all supervisors" refers to the entire sample, the phrase "most supervisors" refers to 10 to 14 participants, the phrase "half of the supervisors" refers to 5 to 9 participants, and the phrase "a few supervisors" refers to 2 to 4 participants. Themes mentioned by a single participant were not included in the findings.

Findings

The benefits of providing art therapy in a school setting.

The benefits of providing therapy in the child's natural environment. Most supervisors stated that there are many children in need who would not receive therapy if it was not available in the school system. Supervisors attributed the value of therapy in the school system to a number of factors: it is free of charge and is situated in the child's natural setting: "...In severe cases, in cases of a very difficult economic situation, or very serious problems, these children would not have had the opportunity to go into therapy". Another aspect mentioned by half of the supervisors relates to the opportunity for intervention in the child's environment, in the class setting: "If we can intervene in the relationships between the children in the class or with the teachers and staff in the here-and-now, it's so much more than just sitting and talking". Most supervisors mentioned that the processes of change take place not only in the children themselves, but also in their educational and social environment: "...There is also a change in the attitude of school staff members, as well as in collective opinions on how to make the environment better suited to the child".

The effectiveness of providing art therapy in the school system. Most supervisors felt that despite the complexities, art therapy in the school system is effective and beneficial and helps both the children and the school system: "I really believe that therapy is useful within the system... The system appreciates the changes..." Half of the supervisors mentioned that a close relationship between the art therapists, the teachers and the multi-disciplinary staff at the school contributes not only to the work done by the therapist, but also to the school staff by enriching their knowledge, offering modeling (behavior) for reference, and changing their perceptions of the children: "Our teachers

love therapy... It is a form of modeling where they can see how you treat and relate to children with a lot of empathy..." Another aspect of working within the school system relates to the relationship with the child's parents. Most supervisors stated that therapy within the school system is beneficial for the relationship with the client's parents: the parents come to the child's natural environment, they connect with the school system, and they receive supervision or combined therapy: "...I started working with dyadic therapy at school... I worked with a group of mothers at school..."

Improving the quality of art therapy through increased work experience and training. Half of the supervisors stated that work within the school system provided a safe workplace and a fertile terrain for abundant and varied experiences with different populations of clients: "It is the biggest employer for therapists today... to acquire experience in working with parents, teachers and children." A few supervisors mentioned the continuing professional training provided by the Ministry of Education as an added benefit to their work: "Therapists are required to undergo professional training... which is usually of a high standard."

The difficulties of providing therapy in the school system.

Inconsistencies between the different RCSCs. Half of supervisors mentioned that there is no uniformity with regard to employment conditions. In addition, within the RCSCs, policies vary regarding the allocation of resources for therapy and in determining a uniform model for therapy: "There are gaps between the RCSCs, something needs to be done to make it more… equal on a national level." This issue creates a problematic situation for therapists who work in various RCSCs at the same time, and have to work in different conditions at each workplace.

Physical conditions that are unsuitable for therapy. Most supervisors noted that although there has been a slight improvement in the working conditions at some schools, there are still therapy rooms that are inappropriate for therapy in terms of their size, location and conditions: "…There are therapists who work in dark, cold bomb shelters." There are also therapy rooms that are used for more than one purpose, for example, as a nurses' station: "…I use the room three days a week but since it's the nurses' room, on the fourth day I have to use another room …" Some therapy rooms lack privacy and people walk through them to get to other areas: "…I supervised a therapist… she didn't even have a key to the room, and every few minutes someone would go through her room…"

In addition, half of the supervisors mentioned the low budget allocations for purchasing equipment and art materials: "At the beginning of the year, it is easier to submit a list of required materials, but if they run out, the problems begin..." They also mentioned that some therapists bring materials from home: "...If a therapist wants the therapy room to look good, they need to bring things from home..." A few supervisors noted that therapists find it hard to complain: "If they dare to say something and fight for good working conditions, what will happen? They might lose their jobs ..."

Too many clients and an overload of written reports. Most supervisors noted the relatively large number of clients per hours of work. Many therapists reported that the schools require group therapy sessions and this increases the number of children seen by each therapist for the same number of therapy hours: "There is a very big overload of clients in different therapy settings... I see this as a real form of exploitation..." Half of

the supervisors argued that the written reports are a burden on therapists: "The essence of therapy is the child and his space, not the report."

The classification of therapists as members of the school staff. Half of the supervisors mentioned that everyone in the Ministry of Education is defined as an educational staff member. This creates confusion in terms of therapists' identity and the definition of their role. There are situations where therapists are required to perform other duties, such as staff duties, taking part in meetings with other staff members in the staffroom, and sometimes using their own artistic abilities for such events: "In the education system, a therapist is defined as part of the educational staff and a lot of the time it is very confusing, particularly for new therapists..."

The job definition. Therapists, like other members of the educational staff, work additional hours beyond the hours allocated for actual therapy. These work hours are intended for other duties, such as attending meeting with parents of clients, staff meetings etc. The number of additional hours is relatively small and insufficient to fulfill all of their duties. This is further exacerbated by scheduling. There are situations where the therapist works on a teacher's day off, which makes it difficult for them to meet: "These additional work hours are often used for meetings and supervision, among other things... In the end, there is not enough time to meet with the parents of clients..."

The lack of specialized training for work in the Ministry of Education. Therapists who have completed their undergraduate training start to work for the Ministry of Education with no specific training or expertise in therapy in this particular framework. Half of the supervisors mentioned difficulty faced by recent graduates of going directly from degree programs to working in schools: "...No one specifically trains

therapists who go to work in the education system. Therefore there is a lot of confusion and embarrassment…"

The lack of training courses tailored to art therapists. Art therapists are required to take professional training courses to be promoted from rank to rank. Most seminars are designed and optimized for educators and not for therapists: "...They have to continue to learn, but the content of the seminars should be adjusted for therapists...."

The issue of loyalty and a sense of belonging among therapists. A few supervisors raised the issue of conflict of loyalty, since therapists belong to a RCSC, but most of the work takes place in schools: "Often there is some confusion as to who is my direct boss, my director or the head of the RCSC..." An additional type of conflict relates to the issue of loyalty to the client or to the school: "The question is... Who is your client, in principle, your client is the Ministry of Education and not necessarily your clients in therapy..."

The difficulty of creating a therapeutic framework adapted to the needs of the client: time for therapy, the rhythm of communication, and privacy. Most supervisors mentioned that the system needs to adapt to the needs of the client and adjust therapy accordingly, not the other way around. The first factor mentioned by most supervisors was the calendar and the multiple vacations throughout the school year: "Therapy is limited in terms of time... and the intervals between therapy sessions do not always correspond to what the child needs..."

When therapy is part of the school program, there is often a sense of confusion and a blurring of boundaries between school and therapy. Half of the supervisors noted that there are clients who had problems transitioning between class and therapy: "The fact

that a child have to go to a math class after therapy… Some of the transitions are not easy".

Another problem in adapting the therapeutic framework to the needs of the client has to do with specific considerations within the system. Half of the supervisors stated that assignments to therapy groups are typically based on school system considerations and not the needs of the child: "If a child is referred to therapy after the therapists' schedule has been organized and they have no free time, a child who needs individual therapy might be referred to group therapy."

A few supervisors mentioned that confidentiality and privacy are hard to preserve in the school system. Children in the classroom can see the client leaving for therapy, and private information can be revealed when therapists interact with the school staff: "...The fact that a child sees me in the classroom or in the staffroom during a break... may create doubts as to whether I am maintaining confidentiality and boundaries..."

The confusion of discourses and cultures. All the supervisors mentioned that therapy and education have two different discourses and cultures. This often creates conflicts, difficulties in mutual understanding, and the need to bridge and adjust the discourse of therapy to that of education. Half of the supervisors said there were unrealistic expectations on the part of the system: "The system wants it to be like taking your car to a mechanic: we'll put the child in therapy, can you fix him? But this is not very therapeutic..." These differences in perceptions create conflicts regarding the approach towards therapy as well. Therapists primarily study dynamic therapy during their training, but the school needs behavioral changes in short periods of time: "...You

turn into a behavioral therapist without knowing what it is... A lot of pressure is put on the therapist..."

Difficulties communicating with parents. Although most supervisors believe that a relationship with the parents of a client during the therapeutic process is necessary, several factors make this difficult to establish. Some schools do not view meetings with parents as legitimate: "There was one school principal who would not allow the therapists to meet with parents, she said it was wasting the child's therapy hours..." The mode of communication with parents depend on the therapists' personalities, and whether they are flexible and ready to encourage parents who find it hard to attend meetings: "...It's very hard to get the parents to come to school... and sometimes it is depressing". This creates a situation where there are, at most, three meetings with parents during a school year - at the beginning, the middle and at the end of the year.

Difficulties arising from the relationship between therapists and the school staff. Half of the supervisors described situations in schools where there is no collaboration between the therapists and the staff members. Information about meetings tends not to be announced and therapists are often not given important information about their clients: "Therapists are never invited to meetings... A therapist gets to school and suddenly discovers that a child has been transferred to another school..." In addition, it is difficult for school staff to deal with and understand the issue of confidentiality that is part of the therapeutic process: "I'm the child's "mother" so you can't do things and keep them secret from me."

The complex relationship with the school principal. Most supervisors noted that certain principals intervene in the therapeutic process and dictate inappropriate

conditions: "On the one hand, some principals really want the resource of therapy... And on the other hand, they want to manage it as they see fit... "It is difficult, in particular for new therapists, to refuse to comply with the principal's demands, or insist on professional boundaries. The way the principal sees art therapy affects funding: "The budget is allocated by the principal... If he doesn't understand the importance of emotional therapy, he won't set aside money for it... "

The impact of seniority and therapists' work experience on job performance. Half of supervisors noted a link between seniority and working conditions: "...Therapists who have worked in the same place for a longer period of time already have a therapy room and have the equipment." This issue also relates to maintaining professional boundaries, and influences therapists' relationship with the school staff: "More experienced therapists feel more confident and appreciated, and if they don't feel like they are under a microscope, they will have more confidence to make better choices." The level of seniority also affects interactions with parents: "...For new therapists... It is difficult to make contact with parents... "

Supervision

All the supervisors stated that supervision often takes place in the RCSCs and only occasionally in the schools where therapists work. Supervision takes place every other week for an hour and a half, usually in a group setting, and in some cases, in individual sessions. The groups are often mixed in terms of levels of experience and seniority, but sometimes are homogeneous. Most of the groups also have mixed therapeutic orientations. Some of the groups center on a certain subject or client population. In most RCSCs there are also meetings of all the therapists: "A forum for all the therapists meets once a month, to discuss more general issues such as ending therapy

or starting therapy with a new client..." Special education schools have more resources and can afford individual supervision sessions for every therapist. This section refers to the advantages and disadvantages associated with supervision.

The supervision group as a source of support and as a place to strengthen professional identity and a sense of belonging. Most supervisors stated that the supervision group becomes a supportive peer group which helps them deal with feelings of loneliness and serves to strengthen their identity and professional affiliation: "...I think that supervision is a place where you can ventilate and release what is happening to you..." Most supervisors include art as part of the supervision process as a means of deepening the observation and understanding the case study: "...Art further expands the circle of observation... It is our tool, so why not use this tool in supervision as well?"

The supervision group with mixed specialties and levels of seniority as a locus of mutual learning. The supervision groups are often mixed in terms of levels of seniority and specialty (for example, art therapy, drama therapy, etc.). Half of the supervisors viewed this blend of seniority within the group as an advantage: "...The veteran therapists contribute their experiences, the younger ones can learn from them, they learn from their peers... "A few supervisors noted disadvantages: "…New therapists come and there is a disparity between the needs of someone who is experienced and someone who is new…" Half of the supervisors viewed groups with mixed specialties as an advantage: "...The big advantage is that we all learn from each other and it expands our set of tools as therapists". Others found it to be challenging: "...We do not always work with the tools that others know how to control..."

The overload on supervision: the number of clients and the number of therapists. Half of the supervisors talked about the heavy workload resulting from a relatively large number of therapists per supervision work hour: "I supervise a large number of people... More than thirty of them, it's madness..." Half of the supervisors stated that they did not have enough supervision hours relative to the number of clients that each therapist works with: "We have an hour and a half a week for four therapists, some people say it is not enough for us, we work with about 25 children..." In addition, a few supervisors mentioned the difficulty of maintaining continuity in supervision within the Ministry of Education framework: "...It is often very difficult for them to maneuver between the supervision sessions and other meetings..."

An inherent conflict of interests within the supervisor role. Half of the supervisors referred to the conflict that therapists feel in their roles as both supervisors and evaluators: "...In certain situations, the therapists feel that they can't fully trust me and share everything with me because I am responsible for their promotion... and I monitor their professional progress in the workplace..."

Suggestions for improving the current situation.

Factors within the school system. Several factors can influence therapy in schools and make it more effective:

The creation of a standardized art therapy model based on legislation and shared by all RCSCs. Half of the supervisors emphasized the need for a legislative definition of the profession, and uniformity across RCSCs throughout the country in terms of working conditions, resources, and the perception of the profession: "...We need legislation and an education system that is more attuned to our profession... " Most

supervisors wanted the Ministry of Education to formulate a clear structure and framework for therapy including the requisite physical conditions, such as a suitable room, privacy, a protected work environment, the necessary equipment, and a reasonable number of clients per therapy hour: "... I think that the Ministry of Education should issue written instructions that are binding, not vague as they are today, regarding the number of clients, and the unique position of the art therapist..."

Defining the role of the RCSC within the school system from a therapeutic perspective. Most supervisors believe that the RCSCs should support therapists working in schools. One way involves preparing the school before a therapist is hired, and dealing with the principal's expectations: "...There should be some preparatory work, to explain therapy to the principal and the school staff…" Furthermore, the school needs to have the appropriate facilities and climate for therapy (e.g., a room, materials and equipment): "We should make sure that if a school wants therapy... It will have a room which functions solely as a therapy room, with an abundance of materials ..." Another factor is the need for support for the art therapist in schools: "...A kindergarten teacher or school principal should realize that they can't do as they wish when it comes to therapy... There are general work rules and guidelines..."

Allocating additional resources to therapy work hours, equipment and supervision. Half of the supervisors mentioned the issue of the allocation of additional funds for therapy: "...If the Ministry of Education would allocate more funds for equipment and extra work hours... things would work better." In addition, there should be extra time for supervision: "...I think that the supervision sessions that the therapists attend once every two weeks in the RCSCs is not enough... "

Creating a collaborative mutual relationship between the therapist and the school staff. Most supervisors emphasized the importance of mutual cooperation and teamwork within the school: "...The system is part of the education system, the teacher or the school is part of the therapeutic process. They are inseparable, and if you ignore them, you are not actually achieving the goals of therapy..." Most supervisors stated that cooperation with the teachers and sharing information with them in a way that does not compromise the client's privacy is essential for the therapeutic process: "...The therapist should definitely talk to the teacher, share with the teacher what s/he believes is the best way to help the child." At the same time, the school staff should share certain information with the therapist: "I would make it clear that the therapist needs to be aware of everything concerning the child…" Half of the supervisors felt that the school should set up a consistent framework for staff meetings to promote joint thinking and efforts concerning the children: "…A meeting with the entire multidisciplinary team should be held at least once a month…"

Explaining the concept of therapy to the educational staff and mediating between different professional discourses . Most supervisors believe that it is important to maintain the uniqueness of therapy and its discourse within the educational framework: "...The therapist should maintain the uniqueness of the therapeutic process and special discourse, but it is also therapists' duty to explain themselves to the educational staff so that they will understand the process..." Most supervisors noted that familiarizing the team with the therapeutic process via lectures, workshops and presenting therapy case studies could lead to a better understanding of the nature of therapy, and improve cooperation within the therapeutic team: "...To make room for therapy, to let people get

to know it, to explain how it operates, to make it as accessible to the teachers as possible..." Half of the supervisors believed that it is the therapist's job to create and maintain this connection: "...It is my responsibility as a therapist to enable them to understand what is happening, the discourse, let them feel that they are partners..." The discourse in the therapy reports should be adjusted: "...End of year reports should not be written in an incomprehensible therapeutic discourse that will not be understood by the school staff; it is possible to write everything in a way that is easier to understand..."

Adjusting therapy to the needs of the client. Most supervisors highlighted the importance of providing solutions that are adapted to the needs of the client as much as possible. For instance, if there is a need for individual therapy sessions, it should be acknowledged and offered to the client. Half of the supervisors mentioned the need to maintain client confidentiality and privacy when conveying important information to the educational staff without compromising the client's privacy: "I think you can tell a lot about the child's condition without repeating exact phrases... ".

The relationship with the parents. Most supervisors believed that the relationship with the parents is essential for the therapeutic process: "Seeing the child in his/her natural family surroundings is a basic part of therapy…" Most supervisors mentioned that according to the Ministry of Education, three meetings a year with parents are the norm, and that this is generally satisfactory. Half of the supervisors believed that the number of meetings should be adjusted according to the needs of the parents and the therapists.

The need for therapists to adapt their work and training to the education system setting. Half of the supervisors mentioned that flexibility and adaptability on the

part of the therapist are crucial: "...They need to be experts at adapting themselves... This requires the therapist to be an integrative person, flexible and mature... A kind of an acrobat..." Alongside flexibility, half of the supervisors noted the importance of setting limits and boundaries and maintaining professional considerations: "To be assertive enough when it comes to professional matters and not be afraid to say no..." Half of the supervisors argued that therapists should be selected for their jobs by the RCSCs: "...There should be better screening; not everyone is capable of working in the Ministry of Education..." Half of the supervisors stated that therapists should undergo special training to prepare them for work in the Ministry of Education: "...What does work within the education system entail, what does it require, what does it offer..?"

Supervision. Most supervisors stated that adding extra hours of individual and group supervision would improve the current situation, and would reduce the number of participants in each supervision group session. Additionally, individual supervision could be offered in conjunction with group sessions. Half of the supervisors stated that it is important to adapt supervision to the needs and level of seniority of the therapists: "...In the early years, there is a greater need... for individual supervision." The supervisors, just like the therapists, are required to fulfill roles within the system and mediate between the school or the RCSCs and the therapists when difficulties arise: "...In the RCSCs, I am the bridge between my RCSC director and what she hears from different workplaces and therapists..." These systemic roles require more time than what is currently allocated as part of non-treatment work hours.

Discussion

This study examined the ways in which supervisors perceive the role of art therapy as it exists today in public schools under the auspices of the Ministry of Education in Israel. It aimed to better understand the complexity of integrating therapy in the school framework, and the desire to reflect on this complexity. Their unique point of view gave us the opportunity to grasp the complex issue of implementing art therapy within the school system. Unlike psychologists' and counsellors' work in schools, art therapy requires a more complicated setting where the therapeutic room and its art materials, creative areas, etc. are crucially important. The findings indicate a disparity between the acknowledgment of the benefits of incorporating art therapy into the school system (Glassman & Prasad, 2013; Moriya, 2000) and the current ministerial approach to its implementation. The findings highlight this gap between the educational and the therapeutic discourses and the difficult position of the art therapist in this system.

The findings were classified according to the perceptions of the supervisors into four main domains: the benefits of offering art therapy in the education system, the difficulties that arise from offering art therapy in the education system, supervision, and lastly, suggestions for improving the current situation of art therapy in the schools. According to the supervisors interviewed here, five factors need consideration:

The regulation of the art therapy profession by the Ministry of Education and the creation of a standardized therapy model. The supervisors suggested that a standardized therapy model should be mandated for all schools that defines the role and position of therapist in schools as well as the role of the RCSCs as a source of support. Recently, guidelines for art therapists working in the Ministry of Education (Israeli Ministry of Education, 2014-2015) were issued in booklet form. This reflects a gradual

attempt to regulate the field, but many issues still remain vague, and thus are subject to varying interpretations by school principals and staff. The outstanding issues include the absorption of new therapists into schools, the mandatory working conditions for therapy such as equipment and therapy rooms, the number of clients per therapy hour, accommodation into the school calendar of the different phases of the therapeutic process, and the nature of the relationship and frequency of contact with educators and parents. A model could enable therapists to work appropriately and professionally.

Changing art therapists' job profile. An art therapist's job consists of therapy hours and non-treatment work hours. The non-treatment work hours are allocated for writing up therapy plans and reports, meeting with parents, attending staff meetings, supervision and preparation for therapy. In practice, there is a shortage of these non-treatment work hours and this affects the quality of these non-therapy duties (Moriya, 2006; Wengrower, 2001). The results show that a reduction in the percentage of non-treatment work hours compared to the percentage of therapy hours should be considered. Therapists should also not need to work in many different schools.

Bridging the gap and resolving the issue of educational and therapeutic discourse. There is a fundamental difference between the discourse of therapy and the discourse of education (Karkaou, 2010; Moriya, 2006). The findings here make it clear that thorough explanations and information (case study presentations, etc.) to the educational staff constitute the best way for therapists to bridge this gap.

Preparing new therapists for work in the Ministry of Education and the provision of additional professional training. The findings indicate a lack of pre-entry training for therapists before working in the educational framework. This training should

be designed to inform potential candidates about the nature of work within this framework. In addition, it is important to adapt in-service professional training courses to better fit the needs of art therapy (working with unique populations, contact with the school staff and parents etc.).

The framework of supervision. The findings indicate that the structure of supervision, particularly if it involves creative processes (Moon, 2000), forms an important anchor for therapists. Reducing the number of therapists in the supervision groups and adding individual supervision sessions when needed could help address therapists' needs.

This study examined the ways supervisors perceive the role and place of art therapy in the school system today. It is important to note that the supervisors' point of view is important but cannot fully represent art therapists' perspectives or that of principals or educators. It is important that this study was conducted in Israel and it is likely that the integration of therapists in the educational system is different in other countries. However, learning about the similarities and differences between different countries may help therapists focus on the conditions enabling an effective therapeutic environment in the educational system. Future studies should examine the extent of the impact of the difficulties and benefits and the effectiveness of offering art therapy in schools. Furthermore, the suitability of operational work plans to working conditions in the field should be tested empirically based on the recommendations made here. This could lead to a new model for art therapy that is adapted to work in the school framework.

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Table 1: Supervisors' Demographic Information

No. & Field	Age	Education	Seniority in the education system	Seniority as therapist	Seniority as supervisor in the education system	No. of supervision settings	No. of supervised therapists	Work settings of supervised therapists
1 Art	59	M.A – Art Therapy, Psychotherapy, Parent supervision, Behavioral Analysis	28	28	~10	1	10-12	Elementary & Middle School, Integrated children
2 Art	52	M.A – Art Therapy for Experienced Therapists, Diploma in Art Therapy, Focused Psychotherapy, Diagnostics	16	15	4	2	30	Special Education: Nursery schools, Elementary & Middle School
3 Art	54	M.A – Art Therapy, Psycho-analytic Psychotherapy, Gestalt, Group Facilitation, Organizational Consulting	29	29	~18	2	~30	Special Education: Nursery schools, Elementary & Middle Schools, Boarding School
4 Art	65	M.A – Art Therapy, Family therapy, Group Facilitation, Psychoanalytic Psycho-therapy, Jungian Psycho-therapy	-	28	17	1	~30	Special Education: Nursery schools, Elementary & Middle Schools
5 Art	54	Diploma in Art Therapy. M.A - Holistic Healthcare, Sandbox Therapy, family Therapy, Psychotherapy.	7	22	12	1	~15	Special Education: Nursery schools, Elementary & Middle Schools, Hospital
6 Art	56	M.A- Communication. Diploma in Art Therapy, Psychotherapy, Dyadic therapy, Diagnostics	16	16	5	1	17	Special Education: Nursery schools, Elementary & Middle Schools
7 Art	55	M.A – Art Therapy for Experienced Therapists, Diploma in Art Therapy	~37	~30	6	1	24	Special Education: Nursery schools, Elementary, Middle & High Schools
8 Psy-cho-drama	40	M.A – Arts Therapies for Experienced Therapists, Diploma in Psychodrama Therapy	9	9	2	1	3	Elementary, Middle & High School, Integrated Children & Special Education
9 Art	59	MA - Art Therapy for Experienced Therapists, Diploma in Art Therapy, Psychotherapy, Therapy & Buddhism	22	29	18	1	20	Special Education: Nursery schools, Elementary, Middle & High

								Schools
10 Art	61	Diploma in Art Therapy. Dyadic Therapy, Dynamic Child Therapy, Focused therapy, Analysis of children's drawings	16	16	5	1	16	Special Education: Nursery schools, Elementary, Middle & High Schools
11 Dance	55	Associate's Degree in Teaching dance and movement, Kestenberg's Diagnostic Approach, Dyadic therapy, Parent Supervision	20	20	3	1	6	Special Education: Nursery schools, Elementary & Middle Schools
12 Art	54	M.A – Art Therapy, Psychotherapy, The "Self" Studies, Therapy and Buddhism	18	18	5	1	5	Special Education Schools
13 Art	57	Art Therapy, Gestalt Therapy, Psychotherapy	32	32	14	2	~40	Special Education: Nursery schools, Elementary, Middle & High Schools
14 Dance	52	M.A – Dance Therapy, Dyadic Therapy	14	14	2	1	5	Special Education: Nursery schools, Elementary & Middle Schools
15 Art	53	M.A – Art Therapy, Sandbox Therapy, Trauma Therapy	12	15	1	1	12	Special Education: Nursery schools, Elementary & Middle Schools