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**Module Manual**

**International Master Arts Therapies**

**Master of Arts**

Freiburg, September 2009

## **WHEREAS**

### Outline

The Masters Degree course, "International Master Arts Therapies", has a volume of 90 credit points and students are awarded a qualification from the KH Freiburg as well as the University of Applied Sciences HAN - Hogeschool van Arnhem en Nijmegen. It is application-oriented and completed as a non-consecutive course of studies.

Lecturers from other European and non-European countries are included in the international orientation of the Master Degree programme and historic-cultural comparative approaches are taken into account. A command of the English language is a prerequisite for the study course (see Study and Examination Regulations). Written documents contributing to the completion of the course can also be compiled in other national languages in agreement with supervisory lecturing staff.

The interdisciplinary nature of the Arts Therapies - such as drama, art and music and dance therapy - consists in the joint attendance of courses and in the mutual exchange of disciplines. This should enable students to work in interdisciplinary teams as well as to supervise these. Furthermore, the Master Degree provides the opportunity for further qualification as children and youth psychotherapist or for a further study in a doctorate.

### Contents and Aims

The contents of the course are related to deepen a scientific approach in the various competences referring to the Arts Therapies, such as the aesthetic, ethical, integrative and cultural anthropological aspects. In addition, it includes a reflection on methods and an understanding of Arts Therapies in the context of varying approaches to healthcare science. The communication of research methods for application in the occupational areas of the Arts Therapies, in regard to quantitative and qualitative investigations, is related to aesthetic actions and a process evaluation of the Arts Therapies. The exemplary research-oriented development of a project regarding execution and evaluation is integrated in the application-oriented study programme. Achieving professionalism in regard to legal and international aspects is a main focus of the programme. The compilation of a Master thesis is the aim of the study course, in consideration of the research contents developed during the study. The thesis can be written in other national languages in agreement with the supervisory lecturing staff. It should contribute to further qualification of the Arts Therapies through the scientific legitimation of the subject as well as the integration in innovative occupational fields. Altogether, the contents of the study programme are aimed at the interdisciplinary nature of the Arts Therapies and are to be understood in the context of varying international approaches.

### About the Course

The study programme can be completed in fulltime or part-time, that is, in at least 3 semesters and up to 6 semesters. Prerequisites for attendance are contained in the study and examination regulations. The study course is set up according to different competence areas with corresponding modules and encompasses, on completion of the Master thesis, overall 6 of these areas with 14 modules, for each of which a confirmation document is issued. The study programme is held in block-seminars, which take place once a month for some days during a week. The study-course for a block-seminar is located at different locations and it may become necessary for students to travel to these locations (e.g. to Nijmegen or Freiburg). A command of the English language is a prerequisite for attending the study course. Written certificates of achievement can also be written in other national languages, in agreement with supervisory lecturing staff.

The study programme is process and transfer-oriented. Module-related transfer exercises and observation related to study groups form components of every semester. Thematic points of focus are defined in every semester and are resulting in project work for the students. This includes the opportunity of attending a transnational study programme at the two cooperating universities, as well as the opportunity to attend international academic and research programmes.

Tuition fees are charged for lectures and examinations. Additional fees can occur as the result of costs for travel, accommodation and food.

<b>Competence 1</b>	<b>Aesthetic and Cultural Anthropological Contexts of the Arts Therapies</b>
<b>Module</b>	<b>1.1 Ethical, Philosophical and Aesthetic Approaches to the Arts Therapies</b>
Course Title	1.1.1. Philosophical Foundations for Aesthetic Research 1.1.2. Research and Documentation of Selective Theories, Topics and Texts 1.1.3. Arts Therapies in Theoretical Examination – Analysis and Comparison 1.1.4. Product Development and Presentation
Compulsory Subject/Compulsory Optional Subject	P
Lecturer	Smits, Hulshof, Junker and others
Language	English (national language)
Semester	First Semester
Places	20
Registration	
Contents/ Teaching and Learning Objects and Qualification Targets / Competences	<p>To act in an artistic therapeutic way requires an in-depth theoretical examination of art and philosophy so that we are able to examine our own theoretical foundations. Due to the fact that a self-contained theory on Arts Therapy does not yet exist, the examination of other related, existing theories should be carried out. The philosophies in question are examined and a theoretical point of reference is chosen which cultivates critical reflection. The ethical standpoint contained therein will act as a pivot, in order to be able to continuously integrate our own aesthetic actions in a socially accountable context. Students may discover their own theoretical positions, which allows them to make observations about their own actions and theoretical foundations which go beyond their existing experiences and fields of knowledge, in order to include them in new paradigms. In the analysis of ethical, philosophical and aesthetic approaches to Arts Therapies students are able to observe their own artistic therapeutic actions on a meta-level and are thereby able to develop new perspectives and new courses of action.</p> <p><b>Aims:</b></p> <ol style="list-style-type: none"> <li>1. Communication of theoretical foundations regarding Art, Psychology and Philosophy, especially the relevant ethics.</li> <li>2. Practical testing and evaluation of existing methods based on aesthetic examination.</li> <li>3. Further development, in terms of a deepening and expansion of the philosophical implications, under particular consideration of current ethical analysis.</li> <li>4. Product development in terms of a documentary report or a presentation.</li> </ol> <p><b>Contents:</b></p> <ol style="list-style-type: none"> <li>1. Literature survey about the relevant scientific areas.</li> <li>2. Application of philosophical and aesthetic theories in the light of psychopathology.</li> <li>3. Development of an aesthetic artistic therapeutic standpoint.</li> <li>4. Description of the newly compiled standpoint in the form of a product description or a contribution – also compiled for a professional journal.</li> </ol> <p><b>Competences:</b></p> <p><u>Professional Competence</u> in the theoretical foundations of aesthetic research in consideration of ethical, artistic, philosophical and psychological approaches = 50%</p> <p><u>Method Competence</u> in the application of methodical implementation in the student's own practical interrelations under examination of aesthetic and ethical queries = 30%</p> <p><u>Interdisciplinary Competence</u> in the immersion of aesthetic action under ethical and philosophical implications in social contexts = 10%</p> <p><u>Key Qualifications</u> in the ability to compile scientific documentation of processes and to be able to present them = 10%</p>
Literature	<b>Ethics of intersubjectivity</b> Levinas, E. (1996). Ethics and Infinity. Conversations with Philippe Nemo. Duquesne

	<p>University Press, Ethik und Unendliches, Wien: Passagen Verlag.</p> <p>Obeyesekere, G. (1978). Illness, culture, and meaning: Some comments on the nature of traditional medicine. In Arthur Kleinman, Edmund R. Alexander, and J.L. Gate., eds., Culture and healing in Asian societies: Anthropological, psychiatric and public health studies pp. 253-264. Cambridge, MA: Schenkman</p> <p>Smits, A. De intersubjectiviteit bij Levinas, vergeleken met de ik-gij-relatie van Buber (oftewel de asymmetrie geconfronteerd met de wederkerigheid).</p> <p><b>Occupational Ethics</b></p> <p>Bruckner, P. (2002). Gij zult gelukkig zijn! Boom, Amsterdam. Verdammst zum Glück. Der Fluch der Moderne. Ein Essay. Aufbau Tb.</p> <p>Mooij, A. (2004). Toerekeningsvatbaarheid – Over handelingsvrijheid. Amsterdam: Boom.</p> <p><b>Ethics in practice</b></p> <p>Petry, D. &amp; Nuy, M. (1997). <i>De ontmaskering. De terugkeer van het eigen gelaat van mensen met chronisch psychische beperkingen.</i> Utrecht: SWP.</p> <p>Petry, D. (2006). Onderweg. Een trialogische biografie. Stichting 'Onderweg' (Die Wanderung).. Maastricht.</p> <p><b>The 'mind-body problem'</b></p> <p>Kugel, J. (1982): <i>Filosofie van het lichaam. Wijsgerige beschouwingen over het menselijke gedrag.</i> Utrecht/Antwerpen: Het Spectrum.</p> <p>Peursen, C.A. v. (1956,1966). Lichaam – ziel – geest. Utrecht: Bijleveld.</p> <p>Ryle, G. (1949,1976). The concept of mind. Harmondsworth: Penguin Books.</p> <p><b>The spirit-body problem in modern science</b></p> <p>Boer, J. A. den Boer (2004). <i>Neurofilosofie – Hersenen, bewustzijn, vrije wil.</i> Amsterdam: Boom.</p> <p>Damasio, A. R. (1994). <i>Descartes' Error – Emotion, Reason and the Human Brain.</i> G.P.Putnam's Sons.</p> <p>Greenfield, S. (2000/2001). <i>Brain story. Ontsluiting van onze raadselachtige binnenwereld.</i> Bosch &amp; Keuning. <i>Brain Story: Why do we think and feel as we do?</i> BBC Books.</p> <p>Labooy, G. (2006). <i>Waar geest is, is vrijheid – filosofie van de psychiatrie voorbij Descartes.</i> Amsterdam: Boom.</p> <p>An updated literature list will be handed out at the beginning of the course.</p>					
Teaching and Learning Form	Lecture x	Seminar x	Excursion x	Exercise Course x	Tutorial	Project X
Amount of work (in hours)	180					
Contact Hours (in lessons/ lessons per semester)	60					
Self-Study (in hours)	120					
Credits	6					
Level	3					
Kind of Performance	Presentation (graded)					

<b>Module</b>	<b>1.2 Cultural Anthropology and Arts Therapies</b>
Course Title	1.2.1 Psychology of Perception and Cognitive Psychology 1.2.2 Aspects of the Aesthetic Practice in Psychology of Arts and Culture 1.2.3 Biographies of Artists and Creative Processes 1.2.4 Cultural Anthropological Aspects in Health Care
Compulsory Subject/Compulsory Optional Subject	P
Lecturer	Hampe, Koch, Menzen, Polit, Sax, Schwarz and others
Language	English (national language)
Semester	First Semester
Places	20
Registration	
Contents/ Teaching and Learning Objects and Qualification Targets / Competences	<p>In artistic therapeutic occupational fields a basic understanding of the approaches of the psychology of perception as well as cognitive psychology to aesthetic creativity, is an absolute prerequisite. The communication of theoretical-practical approaches comprises an introduction to the psychology of arts and culture in relation to a social historical context. In this context an understanding of the aesthetic forms of creativity used by artists in reference to biographical aspects of development are of importance. Broadly speaking it can be assumed that Arts Therapies can be included in the frame of reference belonging to the social sciences and the science of humanities. Therapeutic, social and arts pedagogy, psychology, fine arts and cultural anthropology are formative for aesthetic interventions in the area in which they are to be applied. In action-oriented therapy (processes which are activating, enable the use of resources, are solution-oriented, self-strengthening and action-enabling) and therapy oriented at reprocessing (psychoanalytical, projective, symbolising processes) the multiple dimensionality of artistic expression is used. The social environment is included in subject-centred, autonomous processes. Within their temporal limitations these process experiences can continue to take effect in a (psycho-)dynamic way. Art is the field of reference and examination for reflective aesthetic-therapeutic processes: aesthetic resonances in regard to picture themes (in the fine arts as well as in self-creative aesthetic communication) provoke cognitive processes. Aesthetics and Art History are therefore included as cognitive history in order to reflect upon biographies of artists, Contemporary Art and Outsider Art and others.</p> <p><b>Aims:</b></p> <ol style="list-style-type: none"> <li>1. The communication of foundations for the psychology of perception and cognitive psychology. The acquisition of practical experience regarding different levels of perception in reflection of the theoretical context.</li> <li>2. Communication of the foundations of the formation of art and cultural psychological theory, taking into account practical examples from Aesthetics and Art History as well as Cultural Studies. Gaining an understanding of aesthetic-creative objects in reflection of contexts contained within the psychology of arts and culture.</li> <li>3. Gaining an understanding of exemplary artists' biographies with regard to aesthetic creative processes. Gaining an understanding of biographical aspects in artistic development in relation to social contexts.</li> <li>4. Communication of cultural anthropological approaches in order to gain an understanding of gender and health systems.</li> </ol> <p><b>Contents:</b></p> <ol style="list-style-type: none"> <li>1. Introduction to the psychology of perception of cognition by means of theoretical and practical examples.</li> <li>2. Introduction to the theories of the psychology of arts and culture in relation to practical examples and the analysis of aesthetic-creative objects in reflection of contexts inherent in the psychology of arts and culture.</li> <li>3. Introduction of exemplary artists' biographies in relation to aesthetic-creative processes. Depiction of aspects in artists' biographies in relation to processes of change in the aesthetic expression and in stress or strainful situations occurring as the result of specific mental or physical illnesses.</li> </ol>

	<p>4. Reflection on cultural anthropological approaches to health and illness, disabilities and normality. Gaining an understanding of social anthropological context relations for professional support by taking into account the issue of gender, gaining an understanding of the foreign and the personal with regard to cultural historical determinants.</p> <p><b>Competences:</b>  <u>Professional competence</u> in the foundations for the psychology of perception and cognition as well as the psychology of art and culture in regard to gaining an understanding of aesthetic creative processes and forms of expression = 50%  <u>Method competence</u> in the processing and application of theoretical texts in order to gain an understanding of artists' biographies in relation to processes used to come to terms with life experiences = 20%  <u>Interdisciplinary competence</u> towards understanding cultural anthropological approaches to health and illness, that is, also in regard to aspects of gender issue = 20%  <u>Key qualifications</u> in the ability to work with scientific texts and to apply these, by means of examples, to concrete biographical contexts = 10%</p>
Literature	<p>Allesch, Chr.G./Billmann-Mahecha, E. (1990). <i>Perspektiven der Kulturpsychologie</i>. Heidelberg.</p> <p>Alter, J. S. (1999). Heaps of Health, Metaphysical Fitness: Ayurveda and the Ontology of Good Health in Medical Anthropology. <i>Current Anthropology</i> 40, Supplement (February 1999): S43-S66.</p> <p>Anderson, R. and Cissna, K. N. (red.) (1997). <i>The Martin Buber – Carl Rogers Dialogue. A New Transcript with Commentary</i>. State University of New York Press, Albany (079143489). <i>Dialogo tussen Martin Buber en Carl R. Rogers</i>. In: Bruin, de Tom (red.) (1992). <i>Adam waar ben je? De betekenis van het mensbeeld in de joodse traditie en in de psychotherapie</i>. Folkertsma Stichting, Hilversum.</p> <p>Arnheim, R. (1965). <i>Kunst und Sehen</i>. Berlin.  - (1972). <i>Anschauliches Denken</i>. Köln.</p> <p>Arnold, D. (1993). <i>Colonizing the Body: State medicine and epidemic disease in nineteenth-century India</i>. Berkeley and Los Angeles: University of California Press.</p> <p>Baer, H., Singer, M. &amp; Susser, I. (1997). <i>Medical Anthropology and the World System</i>. Westport: Bergin and Garvey</p> <p>Desjarlais, R. (1992). <i>Body and Emotion. The Aesthetics of Illness and Healing in the Nepal Himalayas</i>. Philadelphia: University of Pennsylvania Press.</p> <p>Dow, J. (1986). <i>Universal Aspects of Symbolic Healing: a Theoretical Synthesis</i>. <i>American Anthropologist</i> 88 (1): 56-69.</p> <p>Farmer, P. (1997). <i>Social Scientists and the New Tuberculosis</i>. <i>Social Science and Medicine</i> 44 (3): 347-358.</p> <p>Gellner, D. (1994). <i>Priests, healers, mediums, and witches: the context of possession in Kathmandu, Nepal</i>. <i>Man</i> NS 29: 1-23.</p> <p>Gombrich, E.H. (1984). <i>Aby Warburg</i>. Frankfurt a.M.</p> <p>Good, B. J. (1994). <i>Medicine, rationality, and experience: an anthropological Perspective</i>. Cambridge: Cambridge University Press.</p> <p>Greene, S.. (1998). <i>The Shaman's Needle: Development, Shamanic Agency, and Intermedality in Aguaruna Lands, Peru</i>. <i>American Ethnologist</i> 25 (4): 634-658.</p> <p>Hampe, R. (1990). <i>Bild-Vorstellungen. Eine kunst- und kulturpsychologische Untersuchung bildlicher Formgebungen</i>. Ammersbek b. Hamburg.</p> <p>Holzkamp, K. (1973). <i>Sinnliche Erkenntnis</i>. Frankfurt a.M.</p> <p>Kleinmann, A. (1980). <i>Patients and Healers in the Context of Culture. An Exploration of the Borderland Between Anthropology, Medicine, and Psychiatry</i>. Berkeley: University of California Press.</p> <p>Kobbert, M.J. (1986). <i>Kunstpsychologie</i>. Darmstadt.</p> <p>Nichter, A. (ed.), <i>Anthropological approaches to the study of ethnomedicine</i>. Amsterdam etc.: Gordon and Breach Science Publishers, pp. 149-189.</p> <p>Sax, W.S. (2004). <i>Healing Rituals: A Critical Performative Approach</i>. <i>Anthropology and Medicine</i> 11 (3): 293-306.</p> <p>Sax, W.S (2006). <i>A Divine Identity-Crisis</i>. In: Köpping, K.-P. / Leistle, B. &amp; M. Rudolph (eds.), <i>Ritual and Identity: Performative Practices as Effective Transformations of Social Reality</i>. Berlin: LIT, pp. 101-127.</p> <p>Sax, W.S. (2007). <i>Heilen Rituale?</i> In: A. Michaels (ed.), <i>Die neue Kraft der Rituale</i>. Heidelberg: Universitätsverlag Winter, pp. 213-236.</p> <p>Schechner, R. &amp; Appel, W. (1991). <i>By Means of Performance: intercultural studies of theatre and ritual</i>. Cambridge: Cambridge University Press.</p> <p>Schurian, W. (1986). <i>Psychologie Ästhetischer Wahrnehmung</i>. Opladen.</p> <p>Schuster, M. (2000). <i>Kunstpsychologie</i>. Hohengehren.</p> <p>Turner, V. W. (1968). <i>The Drums of Affliction: A Study of Religious Processes among the Ndembu of Zambia</i>. Cornell and London: Cornell University Press.</p>

	<p>Wilce, J. M. (1997). Discourse, power, and the diagnosis of weakness: Encountering practitioners in Bangladesh. <i>Medical Anthropology Quarterly</i> 11 (3):352-374.</p> <p>Young, A. (1982). The Anthropologies of Illness and Sickness. <i>Annual Review of Anthropology</i> 11: 257-285.</p> <p>Wittkower, R. (1984). <i>Allegorie und Wandel der Symbole in Antike und Renaissance</i> (1977). Köln.</p> <p>An updated literature list will be handed out at the beginning of the course.</p>					
Teaching and Learning Form	Lecture	Seminar x	Excursion	Exercise Course x	Tutorial	Project X
Amount of Work (in hours)	180					
Contact Hours (in lessons/ lessons per semester)	60					
Self-study (in hours)	120					
Credits	6					
Level	3					
Kind of Performance	Presentation (graded)					

<b>Module</b>	<b>1.3 Inclusion and Integration in the Context of Arts Therapies</b>
Course Title	1.3.1 Inclusion and Integration in National and International Discourse 1.3.2 Approaches and Context-Related Work
Compulsory Subject/Compulsory Optional Subject	P
Lecturer	Menzen, Schuchert, Schwarz and others
Language	English (national language)
Semester	First Semester
Places	20
Registration	
Contents/ Teaching and Learning Objects and Qualification Targets / Competences	<p>Arts Therapists confront the social individualisation and pluralisation which accompanies processes of modernisation with a different approach to everyday life, partial disintegration and varying ethnic, cultural and social affiliations. The variety of social and cultural patterns of affiliation are to be reflected upon in relation to the methods and courses of action belonging to the Arts Therapies and to be correlated with circumstances and clinical pictures determined by social-structural aspects. Meaningful impulses for the further development of Arts Therapies can be gained from the current developments in theory formation of social work and therapeutic pedagogy. The processing of theory formation forms a central aspect, that is, it goes from segregation to integration, from integration to inclusion and from inclusion to the so-called "normal case". The focus is on the relation of integration as a societal, social and pedagogic reform perspective which leads to the partial integration of persons who have been excluded up until now (due to disability, gender, other ethnic backgrounds and other negatively sanctioned attributes), to inclusion as perspective implementation of the natural right of everyone to partake in life within society, as an equal right to have access to all resources and areas of life. Furthermore it includes an examination of our experiences of foreignness, i.e. foreignness as attribution, hierarchies/power in the construction of foreignness and stereotypical interpretation.</p> <p><b>Aims:</b></p> <ol style="list-style-type: none"> <li>1. It comprises a reflection on the concepts of inclusion and integration into everyday life in view of their relative perspectives of recognition in a national and international comparison, getting to know important development trends for implementing inclusive thinking and action, acquiring a deeper understanding of inclusion as a model for professional, artistic and pedagogic performance. In connection with this, students should reflect on their own approach to experiences of foreignness and to derive artistic therapeutic strategies from specific contexts, including factual knowledge, to account for them and put them into practice. This requires an examination of various current concepts of inclusion and integration into everyday life as well as reflection of central perspectives of recognition for their own artistic therapeutic performance.</li> <li>2. It comprises a perception of diversity of life contexts and Lebenswelten, sensitisation to the student's own approach to experiences of foreignness and acquiring a self-reflexive competence with regard to his/her own patterns of attribution in arts therapeutic forms of expression. With regard to these arts therapeutic forms of expression in relation to socio-cultural aesthetic contexts are to be reflected on in a critical manner.</li> </ol> <p><b>Contents:</b></p> <ol style="list-style-type: none"> <li>1. Inclusion and integration are central concepts used to react to modernisation, differentiation and internationally increasing societal diversity. Varying concepts of inclusion and integration and the theoretical roots from which they originate are debated. Part of this is a critical examination of different and often contradictory usages of the terms inclusion and integration, which are accompanied respectively by differing implications regarding their implementation.</li> </ol>

	<p>2. Culture and Ethnicity are not static but rather subject to processes of self-attribution and attribution by others in their transformative nature and thereby also social interpretation and societal power relations. Therefore sensitisation to culturalising social exclusion and an enhancement of self-reflection are necessary for arts therapeutic forms of practice. It is about the student's examination of his/her own experience of foreignness and the expansion of transfer competences.</p> <p><b>Competences:</b>  <u>Professional competence</u> in gaining an understanding of integration and inclusion concepts, also when reflecting on cultural and ethnic aspects = 50%  <u>Method Competence</u> in the exemplary analysis of contexts in life and the surrounding environment in relation to arts therapeutic forms of expression = 20%  <u>Interdisciplinary competence</u> in the examination of the student's own experience of foreignness and in the enhancement of self-reflection and the development of a transfer competence = 20%  <u>Key qualifications</u> in the theoretical examination of scientific queries in regard to inclusion and integration and the ability to document findings = 10%</p>					
Literature	<p>Cloerkes, G. Markowetz, R. (2001). Soziologie der Behinderten. Heidelberg: Universitätsverlag/Edition S.  Cloerkes, G. Markowetz, R. (2001). Soziologie der Behinderten. Heidelberg: Universitätsverlag/Edition S.  Wulf, C. (2001). Einführung in die Anthropologie der Erziehung. Weinheim: Beltz-Studium.</p> <p>An updated literature list will be handed out at the beginning of the course.</p>					
Teaching and Learning Form	Lecture	Seminar x	Excursion	Exercise Course	Tutorial	Project
Amount of work (in hours)	90					
Contact Hours (in lessons/ lessons per semester)	30					
Self-Study (in hours)	60					
Credits	3					
Level	3					
Kind of Performance	Presentation (graded)					

<b>Competence 2</b>	<b>Reflection of Methods in the Application of Art Therapies</b>
<b>Module</b>	<b>2.1 Methods and Indications of Arts Therapies in Practical Fields</b>
Course Title	2.1.1 Overview of Methods, Application and Specification 2.1.2 The Implementation of Methods and Product Development
Compulsory Subject/Compulsory Optional Subject	P
Lecturer	Hampe, Hulshof, Junker, Koch, Menzen, Schwarz and others
Language	English (national language)
Semester	First Semester
Places	20
Registration	
Contents/ Teaching and Learning Objects and Qualification Targets / Competences	<p>A well-founded knowledge of methods is one of the most important foundations of artistic therapeutic work. The current literature does not exclusively deal with the description of general methods, but increasingly refers to the specific application of partial aspects and single artistic therapeutic interventions with regard to specific clinical pictures, social problems or fields of application and their progression. Consequently, an overview of methods and reaching an understanding of the most important diagnostic procedures are indispensable tools for the Arts Therapist.</p> <p><b>Aims:</b></p> <ol style="list-style-type: none"> <li>1. Method overview of one's own field of study in at least 10 defined occupational areas and further development in order to deepen and increase one's knowledge.</li> <li>2. The testing and evaluated application of existing methods in practice. Evaluation for a further development of existing methods and product development in terms of a documentation or a product description for the concrete setting.</li> </ol> <p><b>Contents:</b></p> <ol style="list-style-type: none"> <li>1. A literature survey on existing methods of the student's own field of study and the description of a new application or a newly designed method in the form of a product description.</li> <li>2. The application of several methods in one's own area of experience for empirical review and testing of the conducted procedures with the requirement to initiate further development.</li> </ol> <p><b>Competences:</b></p> <p><u>Professional competence</u> in the scientific examination of methods in different artistic therapeutic fields of application = 40%</p> <p><u>Method competence</u> in the testing and evaluation of methods and their context-related further development = 40%</p> <p><u>Interdisciplinary competence</u> in understanding methodical foundations in therapeutic contexts and in the empirical examination = 10%</p> <p><u>Key qualifications</u> in the further development of existing artistic therapeutic methods in transferring them to other contexts = 10%</p>
Literature	<p>Bruscia, K. (1991). Case Studies in Music Therapy, Barcelona, Phoenixville</p> <p>Frohne-Hagemann, I. (1999). Integrative Musiktherapie als psychotherapeutische, klinische und persönlichkeitsbildende Methode. In: Frohne-Hagemann, I. (Hrsg.). Musik und Gestalt. Klinische Musiktherapie als integrative Psychotherapie. Göttingen: Vandenhoeck &amp; Ruprecht.</p> <p>Hörmann, K. (2003). Musik in der Heilkunde. Münster: Paroli.</p> <p>Karkou, V.&amp;Sanderson, P. (2005). Arts Therapies: A research based map of the field. Elsevier: London: Elsevier.</p> <p>Landgarten, H.B. (1990). Klinische Kunsttherapie: Ein umfassender Leitfaden. Karlsruhe.</p> <p>Lichtenberg, A. (1990). Kunsttherapeutische Arbeit mit schwerst- und mehrfach behinderten Heimbewohnern. In: A.K.T. Forum News 9. 2-12.</p> <p>Menzen, K.-H. (2004). Grundlagen der Kunsttherapie. 2. Aufl. München.</p>

	<p>Menzen, K.-H. (2004). Kunsttherapie mit altersverwirrten Menschen, München.</p> <p>Nijhuis, A. e.a. (2001). Onder de loep. Over de module 'Emoties herkennen en erkennen', met creatieve therapie drama en creatieve therapie beelden. Tijdschrift voor Creatieve Therapie 2001/4 pp. 11-14.</p> <p>Petersen, P. (2002): Forschungsmethoden Künstlerischer Therapie. Grundlagen – Projekte – Vorschläge. Stuttgart/ Berlin: Mayer.</p> <p>Petzold, H. u. Orth, I. (Hg.) (1990). Die neuen Kreativitätstherapien: Handbuch der Kunsttherapie. 2 Bde. Paderborn.</p> <p>Richter, H.-G. (1987). Die Kinderzeichnung. Düsseldorf.</p> <p>Rowan, J&amp;Payne, H. (1993). Handbook of Inquiry in the Arts Therapies. London: Jessica Kingsley.</p> <p>Rubin, J.H. (Hg.) (1991). Richtungen und Ansätze der Kunsttherapie: Theorie und Praxis. Karlsruhe.</p> <p>Schottenloher, G. (1989). Kunst- und Gestaltungstherapie. 2.A. München.</p> <p>Smit, M. (2002). Creatieve therapie met gezinnen. Tijdschrift voor Creatieve Therapie 2002/1 pp. 25-31.</p> <p>Spintge, R. &amp; Droh, R. (1992). Heilen mit Musik. Stuttgart: Fischer.</p> <p>Stahlhamar, B. (2006). Musical identities and music education. Herzogenrath: Shaker.</p> <p>Stoffer, T.H. &amp; Oerter, R. (Hrsg.) (2005). Allgemeine Musikpsychologie, Bd. 1. Göttingen: Hogrefe.</p> <p>Theunissen, G. (Hrsg.) (1980). Ästhetische Erziehung bei Behinderten. Ravensburg.</p> <p>van Deest, H. (1997). Heilen mit Musik. Stuttgart: Thieme.</p> <p>von Spreti, F./Martius, P./Förstl, H. (Hg.) (2005). Kunsttherapie bei psychischen Störungen. München.</p> <p>Wichelhaus, B. (Hrsg.) (1993): KUNSTtheorie. KUNSTpsychologie. KUNSTtherapie. Berlin.</p> <p>Zifreund, W. (Hg.) (1996). Therapien im Zusammenspiel der Künste. Tübingen.</p> <p><b>Journal articles from:</b></p> <ul style="list-style-type: none"> <li>- Nederlandse Tijdschrift voor vaktherapie</li> <li>- Kunst &amp; Therapie</li> <li>- Nederlandse Tijdschrift voor vaktherapie</li> <li>- Musik-, Tanz- und Kunsttherapie</li> <li>- and others</li> </ul> <p>An updated literature list will be handed out at the beginning of the course.</p>					
Teaching and Learning Form	Lecture x	Seminar x	Excursion x	Exercise Course x	Tutorial x	Project
Amount of work (in hours)	210					
Contact Hours (in lessons/ lessons per semester)	70					
Self-Study (in hours)	140					
Credits	7					
Level	3					
Kind of Performance	Presentation (graded)					

<b>Module</b>	<b>2.2 Innovation and Integration of Arts Therapies</b>
Course Title	2.2.1 Innovations of Arts Therapies in Societal Fields of Practice 2.2.2 Interdisciplinary Cooperation and Communication
Compulsory Subject/Compulsory Optional Subject	P
Lecturer	Hampe, Menzen, Rösler, Schwarz, Weiss and others
Language	English (national language)
Semester	Second Semester
Places	20
Registration	

<p>Contents/ Teaching and Learning Objects and Qualification Targets / Competences</p>	<p>This module is to contribute to the development of innovative application forms of Arts Therapies in societally relevant fields of practice. In general, this concerns work with children and adolescents on the one hand, and on the other work with adults, in addition to neurology and geriatrics, areas of psychosomatics and others. A rehabilitative approach to Arts Therapies can make a systematic cognitive stimulation and development of affected persons possible, as well as the support of family members. The aim being to support new forms of integration in the Arts Therapies such as assistance.</p> <p>For the good of the clients, the application of the knowledge of diagnostics and interventions in the relevant practical fields requires communication with other professional groups and interdisciplinary cooperation.</p> <p><b>Aims:</b></p> <ol style="list-style-type: none"> <li>1. The aims are the development of competences in work with children, adolescents, parents and in dealing with social networks when working with artistic therapeutic methods as well as an understanding of socio-historical areas of education, clinical and psychosocial institutions and forms of integrating aesthetic-artistic offers. The areas of application in artistic therapeutic work with adults are to be reflected upon. Different reference fields to psychic experience and to disease processes in clinical and psychiatric areas are to be researched inasmuch as an initiation of psychosocial processes by means of artistic therapeutic interventions can be supportive and helpful. Psychosocial approaches of the psychosomatic and psychiatric occupational fields are to be studied in order to be able to reflect upon psychic processes in their relation to the somatic clinical picture and to discuss innovative forms of intervention of artistic therapeutic methods. A further interesting point is the communication and development of concepts for forms of support and stabilisation in working with elderly people. In this context students are also expected to develop occupational areas regarding assistance.</li> <li>2. The students are to acquire and deepen intersubjective and interdisciplinary communication abilities necessary for cooperation in multidisciplinary teams in their daily artistic therapeutic work routine. The aim is to develop a profile of their artistic therapeutic contributions to projects.</li> </ol> <p><b>Contents:</b></p> <ol style="list-style-type: none"> <li>1. Gaining an understanding of artistic therapeutic forms of activity in cooperation with social networks and the development of exemplary projects in artistic therapeutic occupational fields with children, adolescents, adults and elderly people in different institutions and areas of life. The expansion of occupational field competences, e.g. in the assistance sector. <ul style="list-style-type: none"> <li>- The exploration of different occupational fields in work with children and adolescents (e.g. school, recreational facilities, hospital, psychiatric institutions, youth welfare, children's homes and youth centres, prisons) and the development of exemplary design concepts for artistic therapeutic prevention and intervention work for project or case studies,</li> <li>- The exploration of different occupational fields of adult work (e.g. recreational facilities, prisons, hospital, psychiatric institutions) and the development of exemplary design concepts for the artistic therapeutic prevention and intervention work for project or case studies,</li> <li>- The exploration of different occupational fields of elderly people (e.g. retirement homes, care-taking institutions and others) and the development of innovative supporting concepts for elderly people by means of Arts Therapies.</li> </ul> </li> <li>2. The ability to explain to third parties how Arts Therapies "work" and affect people. Possible expectations directed towards the Arts Therapies and answers to these are to be examined. This includes communication and competence in clinical teams, cooperation in interdisciplinary teams, an understanding of other, non-verbal forms of therapy, counselling work within the care-taking system (parents, relatives, etc.). These abilities are critically tested with regard to their practical relevance in project work, communication, reporting, team work, etc. The opportunities and limits of the artistic therapeutic interventions in a multimedia context are discussed. The creative contribution of Arts Therapies to projects is to be developed for a target group, by means of examples, and presented, including a documentation containing images and text and a critical evaluation concerning the course of the pro-</li> </ol>
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	<p>jects.</p> <p><b>Competences:</b>  <u>Professional competence</u> in the work with children, adolescents, adults and elderly people and in dealing with social networks under application of artistic therapeutic work forms as well as in understanding socio-historical educational areas, clinical and psycho-social institutions and forms of integrating aesthetic creative offers = 50%  <u>Method competence</u> in the cooperation within the framework of interdisciplinary teams and in counselling work carried out within in the care-taking system = 20%  <u>Interdisciplinary competence</u> in the communication with other occupational groups and in the integration into interdisciplinary work forms = 15%  <u>Key qualifications</u> in the ability to developing new forms of integration of the Arts Therapies in projects, by means of examples = 15%</p>
	<p><b>Psychosomatics:</b>  Bautz-Holzherr, M./Pohlen, M. (2001). Eine andere Aufklärung. Frankfurt a.M.  Dreifuß-Kattan, E. (1986). Praxis der klinischen Kunsttherapie. Bern/Stuttgart/Toronto.  Groddeck, G. (1974). Verdrängen und heilen. Regensburg.  Hampe, R. (Hrsg.) (1989). Aurora II und das Pferd im 4. Stock. Zur Klinischen Kunsttherapie und Integrierten Psychosomatik. Bremen.  Heuft, G., Kruse, A. &amp; Radebold, H. (2000). Lehrbuch der Gerintopsychosomatik und Alterspsychotherapie. München: UTB/Reinhardt.  Stangl, A.u.M.L. (1986). Hoffnung auf Heilung. Düsseldorf.  Uxküll, Th. v. (1981). Integrierte Psychosomatik. Stuttgart/New York  Weiszäcker, V.v. (1996). Der Gestaltkreis (1950). Stuttgart.  Wolff, S. (1986). Klinische Maltherapie. Berlin/Heidelberg/New York/Tokyo.</p> <p><b>Arts Therapies:</b>  Uxküll, Th. v. (1981). Integrierte Psychosomatik. Stuttgart/New York  Bach, S. (1995). Das Leben malt seine eigene Wahrheit. Über die Bedeutung spontaner Malereien schwerkranker Kinder. Einsiedeln.  Bader, A. u. Navratil, L. (1976). Zwischen Wahn und Wirklichkeit: Kunst - Psychose - Kreativität. Luzern.  Benedetti, G. (1982). Über die Kreativität des schizophrener Leidenden. In: Psychologie Heute 6. 32 f.  Brög, H./Foos, P./Schulze, C. (2006). Korallenstock. Kunsttherapie und Kunstpädagogik im Dialog. München.  Cohn, R.C. (1976). Von der Psychoanalyse zur themenzentrierten Interaktion: Von der Behandlung einzelner zu einer Pädagogik für alle. Stuttgart.  Dannecker, K. (Hg.) (2003). Internationale Perspektiven der Kunsttherapie. Graz.  Egger, B. (1982). Malen als Lernhilfe: Malen und bildnerisches Gestalten in der Schule und mit geistig und körperlich behinderten Kindern. Bern.  Franzke, E. (1977). Der Mensch und sein Gestaltungserleben: Psychotherapeutische Nutzung kreativer Arbeitsweisen. Bern.  Gorsen, P. (1980). Kunst und Krankheit. Frankfurt a.M.  Hampe, R. (1999). Metamorphosen des Bildlichen. Bremen.  Hartwig, H. u. Menzen, K.-H. (Hg.) (1984). Kunst-Therapie. Ästhetik und Kommunikation: Berlin.  Kraft, H. (Hg.) (1984). Psychoanalyse, Kunst und Kreativität heute: Die Entwicklung der analytischen Kunstpsychologie seit Freud. Köln.  Lichtenberg, A. (1990). Kunsttherapeutische Arbeit mit schwerst- und mehrfach behinderten Heimbewohnern. In: A.K.T. Forum News 9. 2-12.  Menzen, K.-H. (2004). Grundlagen der Kunsttherapie. 2. Aufl. München.  Menzen, K.-H. (2004). Kunsttherapie mit altersverwirrten Menschen, München.  Petzold, H. u. Orth, I. (Hg.) (1990). Die neuen Kreativitätstherapien: Handbuch der Kunsttherapie. 2 Bde. Paderborn.  Richter, H.-G. (1987). Die Kinderzeichnung. Düsseldorf.  Schottenloher, G. (1989). Kunst- und Gestaltungstherapie. 2.A. München.  Theunissen, G. (Hrsg.) (1980). Ästhetische Erziehung bei Behinderten. Ravensburg.  v.Spreti, F./Martius, P./Förstl, H. (Hg.) (2005). Kunsttherapie bei psychischen Störungen. München.  Wichelhaus, B. (Hrsg.) (1993). KUNSTtheorie. KUNSTpsychologie. KUNSTtherapie,</p>

	Berlin. Zifreund , W. (Hg.) (1996). Therapien im Zusammenspiel der Künste. Tübingen. <b>Journal articles from:</b> - Nederlandse Tijdschrift voor vaktherapie - Kunst & Therapie - Musik-, Tanz- und Kunsttherapie - and others  An updated literature list will be handed out at the beginning of the course.					
Teaching and Learning Form	Lecture	Seminar x	Excursion	Exercise Course x	Tutorial	Project X
Amount of work (in hours)	120					
Contact Hours (in lessons/ lessons per semester)	40					
Self-Study (in hours)	80					
Credits	4					
Level	3					
Kind of Performance	Presentation (graded)					

<b>Module</b>	<b>2.3 Healthcare-scientific Aspects in the Application of Arts Therapies</b>
Course Title	2.3.1 Health Procedures in Relation to Neurological, Psychiatric and Psychosomatic Findings 2.3.2 Prevention and Intervention by Means of Arts Therapies in Fields of Practice
Compulsory Subject/Compulsory Optional Subject	P
Lecturer	Bardenheuer, Fuchs, Hampe, Koch, Menzen, Schwarz and others
Language	English (national language)
Semester	Second Semester
Places	20
Registration	
Contents/ Teaching and Learning Objects and Qualification Targets / Competences	<p>Healthcare-scientific approaches to the psyche and soma in consideration of the aspects of prevention and intervention in illnesses are to be examined, by means of examples by reflecting on new research approaches to Arts Therapies. The interventions of Arts Therapies provide a variety of methodical ways to access creativity, communication and rehabilitative development advancements. This requires the mindset of a professional therapist and the various fields of practice require modified artistic therapeutic interventions that are attuned to the particular indications.</p> <p><b>Aims:</b></p> <ol style="list-style-type: none"> <li>1. Gaining knowledge of scientific research on health procedures in consideration of neuro-scientific, psychiatric and psychosomatic queries. The reflection of the therapist's role and of an artistic therapeutic, process-oriented advancement.</li> <li>2. The aims, indications and contraindications in in-patient, out-patient and rehabilitative areas of Arts Therapies are to be reflected in order to support adequate, diversified use of interventions. Forms of prevention and intervention by means of Arts Therapies are to be examined in various fields of practice.</li> </ol> <p><b>Contents:</b></p> <ol style="list-style-type: none"> <li>1. Academic findings about health procedures are to be related to the requirements of, for example, geriatric, neurological, psychiatric and psychosomatic</li> </ol>

fields. The basic conditions of the therapeutic setting in a hospital or outpatient clinic, the requirements for the layout of an artistic therapeutic workplace as well as questions about professional ethics are to be reflected.

By using the example of rehabilitation work, theoretical basics of development psychology, bio-psychosocial illness patterns, the terms salutogenesis, pathogenesis, coping strategies, compliance, etc. are to be acquired as a prerequisite for support work and assistance in handling illnesses. The aim is to develop examples on how typical phases of handling illnesses can be supported by appropriate artistic therapeutic interventions.

2. The history, approaches, conception formation of the field of study as a conjunction between art and psychotherapy are presumed to be known. Although Art Therapy is an unspecific method it does provide specific instruments. These artistic therapeutic interventions comprise nameable components whose structures provide decisions for application during the course of a procedure.

By discussing forms of prevention and intervention, theoretical-practical approaches to Arts Therapies are to be transferred to fields of practice. This applies, for example, to:

- situational interventions (initial, focusing, re-evaluated, solution-oriented, for self-updating support, etc.)
- material-oriented interventions (process-/product-supporting, the effect and use of different materials, the experience of object continuity, the meaning and function of the media in the artistic therapeutic setting as an intermediary object, etc.),
- relationship-oriented interventions (dialogic discussions about pictures and encounters with works; interaction-supporting group exercises and their modifications; disclosing, supportive, resource-oriented exercises, etc.),
- reception-oriented interventions (works of art as a basis of experience and reflection, stimulation of symbolisation, analogy and imagination processes, etc.).
- analysing interventions (differentiated study of a picture as a structured perception for a diagnosis, for further artistic therapeutic interventions, etc.)

Knowledge of the phases of the therapeutic process and group development as well as of the parallelisation of the therapeutic process, of creativity and artistic therapeutic exercises also form the basis for decisions. The different requirements of long-time or short-time therapy are to be reflected. An independently developed manual, as a practice-related decision aid, can be compiled.

The role of the therapist in the context of Arts Therapies that deals with a “third party”, the constructed material, is experienced, practiced and reflected by self-experience of interventions in the group. In a controlled, observed field (e.g. “fishpool work”), the individual competence to act becomes clear through the self- and social perception of the therapist’s behaviour and can be further developed. Different levels in relationship building are perceived and specified. Verbalisations of the artistic-creative, non-verbal processes are included as transfer performances into communication (with the client) and used for intersubjective reflection (also for interdisciplinary communication). The functions of verbal and non-verbal communication levels in educational and supportive processes are reflected.

#### **Competences:**

Professional competence in the understanding of healthcare-scientific approaches to psyche and soma in artistic therapeutic, process-oriented assistance, under the consideration of the preventive and interventional aspects of illnesses, and in the reflection of the therapist’s role = 40%

Method competence in the development of practice-related support in decision-making for artistic therapeutic processes = 40%

Interdisciplinary competence in the understanding of verbal and non-verbal communication levels in education and support processes = 10%

Key qualifications in attaining a mindset as a professional therapist for modified artistic therapeutic interventions in consideration of the particular indications = 10%

Literature	<p>Ahrens, S. (Hrsg.) (1997). Lehrbuch der psychotherapeutischen Medizin. Stuttgart.          Davison, G.C. &amp; Neale, J.M. (1979). Klinische Psychologie. München.          Engelhardt, D.v. (1999). Krankheit, Schmerz und Lebenskunst. München: Beck.          Hegi, F. (1986). Improvisation und Musiktherapie. Paderborn.          Heuft, G., Kruse, A. &amp; Radebold, H. (2000). Lehrbuch der Gerontopsychosomatik und Alterspsychotherapie. München: UTB/Reinhardt.          Hoffmann, S.O. &amp; Hochapfel, G. (1979). Einführung in die Neurosenlehre und Psychosomatische Medizin. Stuttgart: UTB.          Fröhlich, A. (1983). Probleme der Förderung von Schwerst- und Mehrfachbehinderten. In: Hartmann, M. (Hrsg.). Beiträge zur Pädagogik der Schwerstbehinderten. Heidelberg: Schindele.          Kasten, E. (1999). Einmaleins der psychischen Störungen im Alter. Echterdingen.          Mutschler, E., Thews &amp; G., Vaupel, P. (1999). Anatomie, Physiologie, Pathophysiologie des Menschen. Stuttgart: WVG.          Oerter, R., Hagen, C.v., Röper, G. &amp; Noam, G. (Hrsg.) (1999). Klinische Entwicklungspsychologie. Weinheim.          Petermann, F., Kusch &amp; M., Niebank, K. (1998). Entwicklungspsychopathologie. Weinheim.          Riedesser, P. &amp; Fischer, G. (1998). Lehrbuch der Psychotraumatologie. München.          Roth, G. (2001). Fühlen, Denken. Handeln. Wie das Gehirn unser Verhalten steuert. Frankfurt a.M.: Suhrkamp.          Saß, H., Wittchen, H.-U. &amp; Zaudig, M. (Hrsg.) (1996). Diagnostisches und Statistisches Manual Psychischer Störungen (DSM-IV). Göttingen.          Schwabe, Chr. &amp; Röhrborn, H. (1996). Regulative Musiktherapie (3. Auflage). Stuttgart.          Spitz, R.A. (1972). Vom Säugling zum Kleinkind: Naturgeschichte der Mutter-Kind-Beziehungen im ersten Lebensjahr (amerk. 1965). Klett: Stuttgart : Klett.          Spreti, F.v., Martius, P. &amp; Förstl, H. (Hg.) (2005). Kunsttherapie bei psychischen Störungen. Urban &amp; Fischer: München.          Uxküll, Th. v. (1981). Integrierte Psychosomatik. Stuttgart/New York.          Uexküll, T.v. &amp; Geigges, W. (2002). Integrierte Medizin. Stuttgart: Schattauer.          Weizsäcker, V.v. (1997). Gesammelte Schriften 4. Frankfurt a.M.: Suhrkamp.</p> <p>An updated literature list will be handed out at the beginning of the course.</p>					
Teaching and Learning Form	Lecture x	Seminar x	Excursion x	Exercise Course X	Tutorial	Project
Amount of work (in hours)	120					
Contact Hours (in lessons/ lessons per semester)	40					
Self-Study (in hours)	80					
Credits	4					
Level	3					
Kind of Performance	Module-Specific Examination Performance (graded)					

<b>Competence 3</b>	<b>Qualitative and Quantitative Research Methods</b>
<b>Module</b>	<b>3.1 Research Performance in Arts and Science</b>
Course Title	3.1.1 Introduction to Empirical Social Research 3.1.2 Diagnostic Processes, Aesthetic-Creative Analysis and Documentation
Compulsory Subject/Compulsory Optional Subject	P
Lecturer	Elbing, Hampe, Koch, Schulze, Schiltz, Simon and others
Language	English (national language)
Semester	First Semester
Places	20
Registration	
Contents/ Teaching and Learning Objects and Qualification Targets / Competences	<p>An overview of the foundations, applications and methods of qualitative and quantitative social research is to be conveyed, as well as the approaches to research which are especially relevant to the Arts Therapies (such as, among others, aesthetic research). For these areas, a systematic transfer of knowledge regarding the theoretical basis, including a direct link to practical relevance, is planned. It should enable the students to test a research method by means of an example within the framework of a training research project, to analyse the results as well as to document and present them in accordance with their arts therapeutic area of research. In the continuation of this, students will be dealing with method-specialisation in the area of the Arts Therapies (e.g. in the Kestenberg Movement Profile) and are expected to compile a well-directed proposal to accompany their Masters Thesis.</p> <p>Diagnostic competences are to be viewed as necessary prerequisites for strategic orientation regarding arts therapeutic intervention and treatment planning. These become relevant in a process of observation and relations within a therapeutic context. Proficiency regarding the compilation of tests and test theories is required for the evaluation and modification of processes. Documentation and the compilation of reports enable interdisciplinary exchange to take place.</p> <p><b>Aims:</b></p> <ol style="list-style-type: none"> <li> <ul style="list-style-type: none"> <li>- An overview of the research approaches relevant to the Arts Therapies, especially those regarding qualitative as well as quantitative social research,</li> <li>- Acquisition of basic scientific skills in order to be able to research, compile, plan, carry out, evaluate and to document and present a project independently,</li> <li>- Getting to know and testing the scientific instruments used for the evaluation of qualitative as well as quantitative analysis, applied research and evaluation studies in view of the distinctive features of the respective specified artistic medium,</li> <li>- Acquisition of competences for the application to take part in scientific research projects, as well for documentation and public presentations of scientific study results (including documentation of artistic therapeutic proceedings).</li> </ul> </li> <li> <ul style="list-style-type: none"> <li>- Knowledge, choice and modification of the respectively applied procedures, which can be accounted for theoretically as well as by means of model examples. The ability to develop and implement these in arts therapeutic areas of application. Differentiation of standardised and non-standardised assessment. Development of criteria for artistic-creative analysis, reading and understanding symbolising processes, also for the re-evaluation of interventions,</li> <li>- Ability to apply diagnostic processes in a specific disorder-related as well as critical way in the Arts Therapies. Documenting and reporting on diagnostic results.</li> </ul> </li> </ol> <p><b>Contents:</b></p> <ol style="list-style-type: none"> <li> <ul style="list-style-type: none"> <li>- Approaches to qualitative and quantitative social research (foundations, methods, areas of application),</li> <li>- Approaches to aesthetic and arts-oriented research: specific approaches to the complexity of the object of investigation, generation and scientific processing of research queries in the Arts Therapies,</li> <li>- Progression of scientific research aims and projects: from the development and representation of the problem, to a formulation of scientific hypotheses and their empiri-</li> </ul> </li> </ol>

	<p>cal verification, right up to the final evaluation and conclusion,</p> <ul style="list-style-type: none"> <li>- Development and conception of a research design proportionate to the complexity the Arts Therapies as the object of investigation,</li> <li>- Methods pertaining to data acquisition and evaluation within the framework of qualitative and quantitative social research,</li> <li>- Forms of documentation and standards of scientific research and their application in a variety of contexts.</li> </ul> <p>2. Standardised and proven testing procedures, appropriate to the Arts Therapies, are introduced (setup, model and theoretical foundations). The projective techniques indicated for each respective rehabilitative area of application should be able to be distinguished and individually applied. Particularly arts and reception oriented processes are suitable for work in the Arts Therapies.</p> <p>The important non-standardised requirements of diagnostics within the creative process should also be made explicit. Recognising aesthetics and symbolisation within the creative process by means of differentiable artistic-creative analysis is incorporated as a diagnostic possibility. The creatively immanent statements are used for reflection of a linguistic transfer and are considered to provide support for interventions which follow.</p> <p>A specifically orientated application of a procedure is to be put to the test. It deals with clarification of the indications present in the various clinical pictures and with a discourse of the interventions resulting thereof. A representation of the diagnostic procedure as well as the development of an examination and therapy plan, with artistic therapeutic interventions, is to be implemented by means of a case study.</p> <p>Conditions and variants of clinical artistic therapeutic documentation and a conclusive report, taking into account artistic therapeutic criteria, are presented. Necessary and supplementary methods of documentation, as well as limits of the ability to document creative processes, are noted. Interdisciplinary communication with other occupational categories is taken into account.</p> <p><b>Competences:</b>  <u>Professional competence</u> in the attainment of foundations for qualitative and quantitative social research as well as in the application of diagnostic processes for artistic therapeutic processes = 40%  <u>Method competence</u> in the application of qualitative and quantitative research methods and selective diagnostic processes for the evaluation of artistic therapeutic processes = 40%  <u>Interdisciplinary competence</u> in the documentation of studies of affectivity = 10%  <u>Key qualifications</u> in the development of a research design for a project study = 10%</p>
Literature	<p>Bortz, J. (1999). Statistik für Sozialwissenschaftler. Berlin: Springer.</p> <p>Bortz, J. &amp; Döring, N. (1995). Evaluation und Forschungsmethoden. Berlin: Springer.</p> <p>Cruz, R.F. &amp; Berrol, C. (2004). <i>Dance /movement therapists in action: A working guide to research options</i>. Springfield, IL: Charles C. Thomas.</p> <p>Flick, U. (1995). Qualitative Sozialforschung: Theorie, Methoden, Anwendung in Psychologie und Sozialwissenschaften. Reinbek b. Hamburg.</p> <p>Flick, U./Kardoff, E./Steinke, I. (Hrsg.) (2000). Qualitative Forschung. Ein Handbuch. Reinbek b. Hamburg.</p> <p>Friebertshäuser, B./Prenzel, A. (Hrsg.) (1997). Handbuch qualitative Forschungsmethoden in der Erziehungswissenschaft. Weinheim/München.</p> <p>Geyer, S: (2003): Forschungsmethoden in den Gesundheitswissenschaften. Weinheim/ München: Juventa.</p> <p>Lamnek, S. (1995). Qualitative Sozialforschung, Bde 1+2. Weinheim.</p> <p>Mayring, P. (1933). Einführung in die qualitative Sozialforschung. Weinheim.</p> <p>Peez, G. (2005). Evaluation ästhetischer Erfahrungs- und Bildungsprozesse. Beispiele zu ihrer empirischen Erforschung. München: kopäd</p> <p>Petersen, P. (2002). Forschungsmethoden Künstlerischer Therapie. Grundlagen – Projekte – Vorschläge. Stuttgart/ Berlin: Mayer.</p> <p>Ritchie, J. &amp; Lewis, J. (2003). Qualitative Research Practice. A Guide for Social Science Students and Researchers. Thousand Oaks, CA: Sage.</p> <p>Roberts, M.C. &amp; Ilardi, S.S. (2005). Handbook of Research Methods in Clinical Psychology. London: Blackwell.</p> <p>Schnell, R., Hill, P.B. &amp; Esser, E. (1992). Methoden empirischer Sozialforschung (3.überarb. u. erw. Aufl.). München/Wien.</p> <p>Sinapius, P. &amp; Ganß, M. (Hrsg.) (2006). Grundlagen, Modelle und Beispiele kunsttherapeutischer Dokumentation. Wissenschaftliche Grundlagen der Kunsttherapie Bd. 1. Frankfurt a.</p>

Main: Lang.

Tabachnik, B.G. & Fidell, L.S. (2007). Using Multivariate Statistics. Boston: Allyn & Bacon.

#### **Diagnostic instruments in drama therapy**

Caplan, R. e.a. (2000). Kiddie formal thought disorder rating scale and story game. In: Gitlin-Weiner, K. e.a. (2000). Play diagnosis and assessment. 2<sup>nd</sup> Edition. New York: John Wiley & Sons.

Dent-Brown, K. (1999). The Six-Part Story Method (6PSM) as an aid in the assessment of personality disorder. *Dramatherapy*, Vol 21, No 2, pp 10-14.

Gehring, T. e.a. (2000). Family system test (FAST): a systemic approach for family evaluation in clinical practice and reasearch. In: Gitlin-Weiner, K. e.a. (2000). Play diagnosis and assessment. 2<sup>nd</sup> Edition. New York: John Wiley & Sons.

Harvey, S. (2000). Dynamic play approaches in the observation of family relationships. In: Gitlin-Weiner, K. e.a. (2000). Play diagnosis and assessment. 2<sup>nd</sup> Edition. New York: John Wiley & Sons.

Irwin, E. (2000). The use of a puppet interview to understand children. In: Gitlin-Weiner, K. e.a. (2000). Play diagnosis and assessment. 2<sup>nd</sup> Edition. New York: John Wiley & Sons.

Johnson, D. (1988). The diagnostic role playing test. In: The Arts in Psychotherapy, vol. 15, pp. 23-36.

Lahad, M. (1992). Story-making in assessment method for coping with stress: six-piece story-making and BASIC Ph. In: Jennings, S. (1992): *Dramatherapy: Theory and practice*. Vol. 2. London: Routledge.

Landy, R. (2001). Dramatheray assessment: tell-a-story. In: Landy, R. J. (2001). *New essays in drama therapy : unfinished business*. Springfield, Ill., Charles C. Thomas.

Landy, R. (2001). Role profiles: an assessment instrument. In: Landy, R. J. (2001). *New essays in drama therapy: unfinished business*. Springfield, Ill., Charles C. Thomas.

Mueller, N. (2000). The MUG and the Teddy Bears' picnic: storytelling techniques for the assessment of children's emoional and behavioral problems. In: Gitlin-Weiner, K. e.a. (2000). Play diagnosis and assessment. 2<sup>nd</sup> Edition. New York: John Wiley & Sons.

Moore Taylor, K. (2000). The play history interview. In: Gitlin-Weiner, K. e.a. (2000). Play diagnosis and assessment. 2<sup>nd</sup> Edition. New York: John Wiley & Sons.

Rekkers, M. en Schoemaker, E (red.) (2002). *Gewichtige lichamen. Lichaamsbeleving en eetstoornissen*. Leuven: Acco.

Russ, S. e.a. (2000). Play assessment of affect: the affect in play scale. In: Gitlin-Weiner, K. e.a. (2000). Play diagnosis and assessment. 2<sup>nd</sup> Edition. New York: John Wiley & Sons.

Segal, M. e.a. (2000). Observing for individual differences in the social interaction styles of pre-school children. In: Gitlin-Weiner, K. e.a. (2000). Play diagnosis and assessment. 2<sup>nd</sup> Edition. New York: John Wiley & Sons.

#### **Diagnostic instruments in dance and movement therapy**

Action Profile (AP) / Movement Pattern Analysis (MPA) (Warren Lamb; P. Ramsden)

Assessments for Aggression and Hyperactivity in Children (Manual; R. Kornblum)

BAST - Movement Analysis Scales & Test (Hedda Lausberg, 2006)

Body-Mind Movement Scales (BMMS) (Yona Shahar-Levy)

BRIAAC (Movement Assessment for Autistic Children) (Beth Kalish-White)

Expressive Movement Scale (Dosamantes-Beaudry, 1980, 1990, 1992)

Intervention Checklist 1 and 2 (ICL and ICL2) Bräuningner, I. (2006)

Kestenberg Movement Profile (KMP) (Judith Kestenberg)

KMP Questionnaire and Brief KMP Questionnaire (Koch & Müller, 2007)

Körperbildskulptur-Test (body-image-sculpture-test; von Arnim, 2007)

Laban Movement Analysis (LMA) (v. Laban) + I. Bartenieff (LBBS)

Movement Signature Analysis (Martha Davis)

Movement Psychodiagnostic Inventory (MPI) (Martha Davis)

Movement Diagnosis Tests- (Espenak, 1989)

Nonverbal Assessment of Family Systems (NVAFS) (Dulicai, 1977,1992)

Serlin Kinaesthetic Imagery Profile (SKIP) for Women with Breast Cancer (Serlin, 2006)

The Functional Assessment of Movement and Perception (FAMP) (Berrol & Katz, 1990)

#### **Diagnostic instruments in art therapy**

RS-Index. Analyse van beeldelementen. (Rutten-Saris).

Gannt, L. (1990). Formal Elements Art Therapy Rating Scale (FEATS).

Cohen, B. The diagnostic Drawing Series (DDS)

The Kwiatkowska System.

Landgarten's Family Art Psychotherapy Assessment

The Goodenough-Harris Drawing Test.

The Silver test of cognitive skills and adjustment

The Levick emotional and cognitive art therapy assessment

Developmental Art therapy Evaluation ( Williams & Wood)

[bron: Feder & Ferder (1998). The art and science evaluation of art therapies.]

#### **Diagnostic instruments in music therapy**

Langenberg, M., Aigen, K. & Frommer, J.(Hrsg.) (1996). *Qualitative Music Therapy Research*. Gilsun.

Rider's Musical perception assessment of cognitive development (M-PACD)

	<p>Lipe's Music-based evaluation of cognitive function (MBECF)  Halstead-Reitan Battery (HRB)  Smeijsters, H. (1996). Qualitative Single-Case Research in Practice: A Necessary, Reliable and Valid Alternative for Music Therapy Research. Gilsum.  Seashore Rhythm Test (SRT)  Primary Measures of music audiation (PMMA)  Determining Specific Music Therapy Needs  [bron: Feder &amp; Ferder (1998): The art and science evaluation of art therapies.]  Hakvoort, L. (2004). Dadergedrag waarneembaar gemaakt.  Muziektherapie als observatie-instrument voor forensische patiënten. Tijdschrift voor Creatieve Therapie 2004/4 pp. 7-13.  Wheeler, B.L. (Hrsg.) (1995). Music therapy research. Quantitative and qualitative perspectives. Phoenixville.</p> <p>An updated literature list will be handed out at the beginning of the course.</p>					
Teaching and Learning Form	Lecture X	Seminar x	Excursion	Exercise Course x	Tutorial	Project X
Amount of work (in hours)	240					
Contact Hours (in lessons/ lessons per semester)	80					
Self-Study (in hours)	160					
Credits	8					
Level	3					
Kind of Performance	Doc. (graded)					

<b>Module</b>	<b>3.2 Process Evaluation and Aesthetic Research</b>
Course Title	3.2.1 Phenomenology and Embodiment 3.2.2 Process Evaluation and Quality Management
Compulsory Sub-	P

ject/Compulsory Optional Subject	
Lecturer	Hampe, Koch, Fuchs, Schiltz, Schulze and others
Language	English (national language)
Semester	Second Semester
Places	20
Registration	
Contents/ Teaching and Learning Objects and Qualification Targets / Competences	<p>An overview of phenomenological and embodiment approaches for the Arts Therapies is to be conveyed. For these areas knowledge about the theories is to be systematically included, as well as the corresponding methodology and empiricism in relation to the research modules, in order to be able to apply this with regard to the final thesis.</p> <p>In order to examine the affectivity of artistic therapeutic processes and aesthetic forms of practice, skills regarding evaluation and quality control are indispensable. For this, the mediation of analytical methods and the instructions for application of evaluation studies in fields of practice are necessary. It concerns an introduction to achieving qualitative and scientific research work.</p> <p><b>Aims:</b></p> <ol style="list-style-type: none"> <li>1. <ul style="list-style-type: none"> <li>- An overview of the theories and research approaches relevant for the Arts Therapies,</li> <li>- Acquisition of basic skills to be able to plan, carry out and document projects independently according to phenomenological procedures,</li> <li>- Getting to know and testing scientific instruments in applied research work with a view on the particularities of the respective and specific arts medium in question.</li> </ul> </li> <li>2. <ul style="list-style-type: none"> <li>- Consolidation of basic skills for controlled practice and evaluation regarding quantitative and qualitative research methods. It concerns the ability to independently compile documentations of artistic therapeutic work by means of evaluations appropriate to the method as well as providing a suitable interpretation.</li> <li>- Aesthetic research and artistic enquiry as artistic analogue, self-contained meta concepts of artistic therapeutic research are to support methodical frames of work for the development and implementation of an investigative and awareness-generating reflection on practice in the arts mediums. The aim being to develop concrete and individual solutions for the differences and/or connections between different scientific and poly-aesthetic approaches in the evaluation of practical projects. The ability to work independently in a scientific manner, in terms of controlled practical work and to thereby use scientific and artistic methods of recognition within their medium and make use of them across mediums and to relate them to one another in a cognitive supportive way, is to be tested. It concerns guided instruction so that students are able to comprehensibly represent and dispute their own methodical approach in interdisciplinary contexts.</li> </ul> </li> </ol> <p><b>Contents:</b></p> <ol style="list-style-type: none"> <li>1. <ul style="list-style-type: none"> <li>- Approaches to Phenomenological Philosophy and research methodology,</li> <li>- Embodiment Approaches: interdisciplinary theory formation and research (Psychology, Anthropology, Cognitive Linguistics, Cognitive Science, Neuroscience).</li> </ul> </li> <li>2. <p>Selective methods of qualitative and quantitative documentation and research of individual cases; models of cross-linked documentation in interdisciplinary contexts; strategies for data preparation, evaluation and interpretation; decision factors for the application of individual methods as well as for combinations of qualitative and quantitative approaches and their potential application.</p> <ul style="list-style-type: none"> <li>- Aesthetic research and artistic enquiry as epistemic background, integrative method and application of scientific and multimedia-based artistic means of cognition. Familiarisation with the current international discourse regarding the connection of aesthetic research with central concepts of socio-scientific research. Students' own support for their practical projects in terms of permanent reflective exploration and cognitive consolidation on a meta-level by means of aesthetic research.</li> </ul> </li> </ol>

	<p><b>Competences:</b>  <u>Professional competence</u> in the understanding of phenomenological and embodiment approaches and in the quality assurance of artistic therapeutic research = 30%  <u>Method competence</u> in aesthetic research under the application of artistic enquiry = 30%  <u>Interdisciplinary competence</u> in the correlation of aesthetic research with central concepts of socio-scientific research = 20%  <u>Key qualifications</u> in the representation and reflection of students' own methodical procedures regarding artistic therapeutic research in interdisciplinary contexts = 20%</p>					
Literature	<p>Bauer, J. ((2004). Das Gedächtnis des Körpers. Wie Beziehungen und Lebensstile unsere Gene steuern. München: Piper.  Fuchs, T. (2008). Das Gehirn – ein Beziehungsorgan. Eine phänomenologisch-ökologische Konzeption. Stuttgart: Kohlhammer.  Roth, G. (2001). Fühlen, Denken. Handeln. Wie das Gehirn unser Verhalten steuert. Frankfurt a.M.: Suhrkamp.  Smeijsters, H. (2000). Handboek Creatieve Therapie, Bussum.  Smeijsters, H. (2000). Handboek Muziektherapie, Deel II, hoofdstukken 1 – 4 , Heerlen.  Storch, M., Cantien, B., Hüther, Tschacher, W. (2006). Embodiment. Bern: Huber.  An updated literature list will be handed out at the beginning of the course.</p>					
Teaching and Learning Form	Lecture x	Seminar x	Excursion	Exercise Course x	Tutorial	Project
Amount of work (in hours)	210					
Contact Hours (in lessons/ lessons per semester)	70					
Self-study (in hours)	140					
Credits	7					
Level	3					
Kind of Performance	Module-Specific Examination Performance (graded)					

<b>Competence 4</b>	<b>Research-Oriented Project Work</b>
<b>Module</b>	<b>4.1 Development of Concepts of Study-related Research Projects</b>
Course Title	4.1.1 Concept Development for an Arts Therapeutic Research Project 4.1.2 Development of Quantitative and/or Qualitative Evaluation Methods
Compulsory Subject/Compulsory Optional Subject	P

Lecturer	Hampe, Hulshof, Junker, Koch, Menzen, Schulze, Schwarz and others					
Language	English (national language)					
Semester	Second and Third Semester					
Places	20					
Registration						
Contents/ Teaching and Learning Objects and Qualification Targets / Competences	<p>The aim is to develop a project study about effectiveness under consideration of quantitative and/or qualitative data collection. This is equivalent to scientific perceptions, thinking and actions, which may contribute to the influence of occupational opinion-forming and decision-making processes by means of empirical data collection. The questions to be examined are related to occupational fields of practice and require the methods and techniques of quantitative and/or qualitative social research. The scientific approach of artistic therapeutic work forms in Therapeutic Pedagogy is thus legitimised.</p> <p><b>Aims:</b></p> <ol style="list-style-type: none"> <li>1. Research questions are to be defined on the basis of the respective artistic therapeutic field of practice. Hypotheses relevant to the research work are to be deduced.</li> <li>2. The aim is to develop a scientific design that includes different data-collection methods. A methodical conceptualisation has to be designed.</li> </ol> <p><b>Contents:</b></p> <ol style="list-style-type: none"> <li>1. The respective field of practice is to be problematised in view of the inclusion of artistic therapeutic work forms. Research questions and hypotheses that allow for innovative work in the respective field of practice are to be developed. The students are to set up plans for an empirical study.</li> <li>2. It concerns a selection and definition of the research design with regard to already studied approaches. The use of computer-based social research is possible.</li> </ol> <p><b>Competences:</b></p> <p><u>Professional competence</u> in the development of an artistic therapeutic project study with an appropriate research design = 40%</p> <p><u>Method competence</u> in the implementation of qualitative and/or quantitative research methods in a project study = 40%</p> <p><u>Interdisciplinary competence</u> to set up a transfer in the implementation of empirical research approaches in an exemplary field of practice = 10%</p> <p><u>Key qualifications</u> in the problem-oriented approach to artistic therapeutic fields of practice = 10%</p>					
Literature	<p>Bortz, J. (1999). Statistik für Sozialwissenschaftler. Berlin: Springer.</p> <p>Flick, U. (1995). Qualitative Forschung: Theorie, Methoden, Anwendung in Psychologie und Sozialwissenschaften. Reinbek b. Hamburg: Rowohlt.</p> <p>Flick, U., Kardoff, E.v. &amp; Steinke, I. (Hrsg.) (2000). Qualitative Forschung. Ein Handbuch. Reinbek b. Hamburg: Rowohlt.</p> <p>Smeijsters, H. (1991). Methoden van onderzoek in de muziektherapie en andere Creatieve Therapieën. Nijmegen: Hogeschool Nijmegen.</p> <p>Lamnek, S. (1995). Qualitative Sozialforschung Bde. 1+ 2. Weinheim: Psychologie Verlags Union.</p> <p>Rost, J. (1996). Testtheorie, Testkonstruktion. Bern.</p> <p>Stieglitz, R.-D. et al. (Hrsg.) (2001). Psychodiagnostik in Klinischer Psychologie, Psychiatrie, Psychotherapie. Stuttgart.</p> <p>Wigram, T. e.a. (1995). The Art &amp; Science of Music Therapy – A Handbook. Harwood.</p> <p>An updated literature list will be handed out at the beginning of the course.</p>					
Teaching and Learning Form	Lecture	Seminar x	Excursion	Exercise Course	Tutorial	Project x
Amount of work (in hours)	150					
Contact Hours (in lessons/ lessons per semester)	50					
Self-Study (in hours)	100					
Credits	5					
Level	4					
Kind of Performance	Doc. (graded)					

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<b>Module</b>	<b>4.2 Study-related Scientific Practice</b>					
Course Title	4.2.1 Implementation and Evaluation the Project Work 4.2.2 Documentation of the Fields of Experience					
Compulsory Subject/Compulsory Optional Subject	P					
Lecturer	Hampe, Hulshof, Junker, Koch, Menzen, Schulze, Schwarz and others					
Language	English (national language)					
Semester	Third Semester					
Places	20					
Registration						
Contents/ Teaching and Learning Objects and Qualification Targets / Competences	<p>This module concerns the transfer of theoretical knowledge in concrete interdisciplinary practical application for the purpose of consolidating the student's scientific competence. The implementation and realisation of conceptually developed research work in an artistic therapeutic field of practice is to be tested. To do so, methods and techniques of concept development are to be applied and implemented in reference to the project. The project study is to be analysed and documented according to quantitative and/or qualitative procedures.</p> <p><b>Aims:</b></p> <ol style="list-style-type: none"> <li>1. Concept development for a practice-relevant study of artistic therapeutic forms of application. Implementing research questions in fields of practice and testing methodical forms of application. To apply acquired knowledge in practice.</li> <li>2. To put the acquired knowledge into practice with a concrete research subject regarding the scientific paper that is to be written. To evaluate and document fields of experience by means of examples and according to academic standards.</li> </ol> <p><b>Contents:</b></p> <ol style="list-style-type: none"> <li>1. Putting methodical concept forms into practice and implementation of the developed research design. The use of quantitative and/or qualitative forms of examination.</li> <li>2. Preparation and evaluation of the research project. The interpretation and generalisation of results. To present research results in an appropriate and comprehensible manner.</li> </ol> <p><b>Competences:</b></p> <p><u>Professional competence</u> in the concept development of a practice-relevant study of artistic therapeutic forms of application according to academic standards = 40%</p> <p><u>Method competence</u> in the evaluation and documentation of a research project = 40%</p> <p><u>Interdisciplinary competence</u> in the use of qualitative and/or quantitative research methods in relation to an exemplary study = 10%</p> <p><u>Key qualifications</u> in the compilation of a paper = 10%</p>					
Literature	<p>Subject-related literature information</p> <p>An updated literature list will be handed out at the beginning of the course.</p>					
Teaching and Learning Form	Lecture	Seminar x	Excursion	Exercise Course	Tutorial	Project x
Amount of Work (in hours)	300					
Contact Hours (in lessons/ lessons per semester)	60 (+ 40 E-Learning)					
Self-Study (in hours)	240					
Credits	10					

Level	4
Kind of Performance	Module-Specific Examination Performance (graded)

<b>Competence 5</b>	<b>Theoretical Foundations of the Occupational Field Competence of Arts Therapies in National and International Exchange</b>
<b>Module</b>	<b>5.1 Occupational Field Competence</b>
Course Title	5.1.1. The Foundations of Arts Therapeutic Work in the Occupational Field 5.1.2 Service Provision Law
Compulsory Subject/Compulsory Optional Subject	P
Lecturer	Franzke, Kössler, Menzen, Schwarz, Winkler and others
Language	English (national language)
Semester	Second Semester
Places	20
Registration	
Contents/ Teaching and Learning Objects and Qualification Targets / Competences	<p>Artistic therapeutic work in the occupational field requires knowledge about the fundamental correlations of rehabilitation. In particular, knowledge of the coding of Arts Therapies within the healthcare system, e.g. in Germany in the KTL 2007, is necessary. This knowledge should enable the arts therapist to position him-/herself within institutional structures and to design according approaches such as settings for artistic therapeutic work.</p> <p>Therapeutic practice requires a elementary knowledge of service provision law. The communication of the national and European legal situation in comparison with each other is indispensable for future managers.</p> <p><b>Aims:</b></p> <ol style="list-style-type: none"> <li> <ul style="list-style-type: none"> <li>- A basic knowledge of the KTL System (Classification of Therapeutic Services) belonging to the pension insurance institute as well as of the DRG system (Diagnosis Related Groups).</li> <li>- Comprehensive knowledge of the institutional structures, their respective specificity, the duties of the different professions.</li> <li>- The specificity of artistic therapeutic work in the occupational field is to be understood by means of experience, theoretically founded and communicable to other professions.</li> <li>- The approaches to therapeutic work in regard to the specificity of clinical pictures as well as to the resources which are to be developed are presumed to be known.</li> <li>- A reflected self-awareness of therapeutic work and the development of a professional attitude are required. This incorporates the ability to differentiate between levels of relationship and of verbalisation as well as the ability to present one's own tasks in the respective institutional teams.</li> </ul> </li> <li> <ul style="list-style-type: none"> <li>- The social service providers do not only have a legal relationship with their clients/patients, but also with the social security institutions. The law on service provision deals with this legal relationship. It concerns, among other things, the authorisation of social institutions, service provisions and the requirements regarding these provisions. Basic knowledge of the law on service provision is indispensable for all managers in the social work sector. In addition, all legal aspects of insurance and liability have to be considered.</li> </ul> </li> </ol> <p><b>Contents:</b></p> <ol style="list-style-type: none"> <li> <ul style="list-style-type: none"> <li>- The history and approaches such as concept formation of the subject as a conjunction of fine art, psychotherapy and cognitive therapy are to be understood and presented in an argumentative fashion.</li> <li>- It especially includes knowledge of rehabilitation as medicinal, work-enhancing, social and complementary service provisions, treatment and counselling procedures, with the aim of permanently (re-)integrating physically, mentally or psychologically disabled people, people with chronic illnesses or people threatened by disability in order to (re)integrate people into society and occupations on a long-term basis. Also, the context of therapeutic work and its regulations, in particular</li> </ul> </li> </ol>

	<p>the Sozialgesetzbuch SGB I § 10 [German Code of Social Law I, § 19] which regulates the tasks of the rehabilitation providers, should be known and available.</p> <ul style="list-style-type: none"> <li>- The providers of rehabilitation, organised in the Bundesarbeitsgemeinschaft für Rehabilitation (BAR) [Federal Working Group for Rehabilitation] as established on the conceptual basis of the World Health Organisation (WHO) subsequent to the International Classification of Impairments (biological impairments), disabilities (functional impairments) and handicaps (social impairments) in their IC-IDB Catalogue, should be known. Their rehabilitation measures directed at the relevant state of physical, psychological and social well-being are to be communicated with regard to their health political and healing aspects.</li> <li>- The specificity of the Arts Therapies is to be tangible, theoretically justified and professionally communicable.</li> <li>- The specific diagnoses are to be understood and communicated by means of clinical patterns are expected to be partly traceable.</li> <li>- Aesthetic creative procedures in Arts Therapies in regard to the cognitive, sensorimotoric, emotional-effective and psychosocial requirements are to be available for the respective points of focus.</li> </ul> <p>2.</p> <ul style="list-style-type: none"> <li>- Introduction to the law on service provision,</li> <li>- The requirements for the authorisation of service provisions,</li> <li>- The daily rates for patient care and other service provisions,</li> <li>- Legal requirements for quality assurance,</li> <li>- The impact of the service provision law on the relationship between institution and client/patient,</li> <li>- Service provision law in single areas of the social services,</li> <li>- The impact of the European Union rights on service provision,</li> <li>- The legal situation of art therapists with regard to insurance and liability.</li> </ul> <p><b>Competences:</b></p> <p><u>Professional competence</u> in understanding artistic therapeutic work in the occupational field and in acquiring basic knowledge of the law on service provision = 50%</p> <p><u>Method competence</u> in acquiring basic knowledge of professional competence and in the transfer to methods of Arts Therapies = 20%</p> <p><u>Interdisciplinary competence</u> in acquiring basic knowledge of the law on service provision and of the integration of Arts Therapies into the health system = 20%</p> <p><u>Key qualifications</u> for a legal understanding of artistic therapeutic work within the healthcare system = 10%</p>					
Literature	An updated literature list will be handed out at the beginning of the course.					
Teaching and learning form	Lecture x	Seminar x	Excursion	Exercise Course	Tutorial	Project
Amount of work (in hours)	90					
Contact Hours (in lessons/ lessons per semester)	30					
Self-study (in hours)	60					
Credits	3					
Level	3					
Kind of Performance	Written test (graded)					

<b>Module</b>	<b>5.2 Clinical Professionalisation</b>
Course Title	5.2.1 Modern Psychotherapeutic Concepts of Clinically Relevant Issues 5.2.2 Casuistic Seminar on Clinical Professionalisation of the Arts Therapies
Compulsory Subject/Compulsory Optional Subject	WP
Lecturer	Bolle, Elbing, Frank, Niedereiter and others
Language	German
Semester	Second Semester
Places	20
Registration	
Contents/ Teaching and Learning Objects and Qualification Targets / Competences	<p>For clinical professionalisation, the students are to learn about the theoretical background to gain knowledge of psychotherapeutic diagnostics and therapy in order to transfer it to relevant treatment situations.</p> <p><b>Aims</b></p> <p>1. Consolidation of knowledge of psychotherapeutic diagnostics and therapy. The diagnostic findings and symptoms are to be linked with specific therapeutic approaches and their implementation in a treatment situation. A theoretical understanding of the individual psychiatric and psychosomatic clinical patterns in their origin, specification, genesis as well as of the manifested basic conflicts is to be developed. It concerns the ability to communicate professionally the psychopathological findings and approaches to therapy in an interdisciplinary clinical treatment team.</p> <p>2. The aim of the casuistic seminar is to reflect the individual artistic therapeutic therapy approaches in the context of clinically relevant questions in a differentiated and scientifically-founded manner, to subsequently transfer them to the respective clientele and the context and to apply them. The artistic therapeutic methods and process-oriented proceedings are connected with the clinical symptoms of the patients and examined with regard to their indication and effectiveness. The focus is placed on cross-linking of the specific practical background of experience with modern diagnostic and therapeutic conceptions.</p> <p><b>Contents:</b></p> <p>1. Revision course of differential diagnostics (psychological findings, symptoms and syndromes) and therapy. The aim is to communicate a comprehensive knowledge of the most important psychiatric and psychosomatic illnesses, crisis interventions, how to deal with suicidal tendencies and a differentiation of structure-centred, conflict-centred and trauma-centred approaches. The consequences of the respective therapeutic points of focus in an interdisciplinary professional context, the differential indication of psychotherapeutic and artistic therapeutic interventions are to be problematised. Students are to receive guidance with regard to the compilation of a case history.</p> <p>2. Developing a focus point for a treatment, case conference, case presentation, case reflection in reflection of the communicated perspectives. Identification of and dealing with significant motives in the context of clinical issues, development of sensible structures of peer consultation, evaluation and reflection of therapeutic processes in the team are to be problematised. Therapeutic basic positions regarding a psychodynamic understanding of processes with artistic therapeutic means are to be developed. It concerns the acquisition and documentation of narrative structures in artistic therapeutic processes and meaningful approaches to artistic therapeutic clinical procedures.</p> <p><b>Competences:</b></p> <p><u>Professional competence</u> in acquiring knowledge of psychotherapeutic diagnostics and therapy as well as in the transfer to relevant treatment situations = 50%</p> <p><u>Method competence</u> in the ability of development of case studies and in the comprehension of narrative structures in artistic therapeutic processes = 20%</p> <p><u>Interdisciplinary competence</u> in the consolidation of knowledge of psychotherapeu-</p>



	<p>rum for the presentation of own research results and for testing scientific forms of presentation.</p> <p>3. International guest lecturers provide the opportunity of broadening the academic range of offers and encounters with the latest international approaches to Arts Therapies. The exchange with innovative artistic therapeutic methods in social fields of practice allow for an expansion of one's own scope of action.</p> <p><b>Competences:</b>  <u>Professional competence</u> in acquiring knowledge of specific international approaches to artistic therapeutic practice and research = 40%  <u>Method competence</u> in testing of innovative artistic therapeutic methods = 40%  <u>Interdisciplinary competence</u> in the presentation of the student's own scientific research results = 10%  <u>Key qualifications</u> in communicative competence in order to analyse scientific research results = 10%</p>					
Literature	<p><b>International research approaches and reports on artistic therapies</b>  Bruscia, K.E. &amp; Grocke, D.E. (2002). Guided Imagery and Music: The Bonny Method and Beyond. Gilsum NH.: Barcelona publishers.  Grocke, D.E. &amp; Wigram, T. (2007). Receptive Methods in Music Therapy. London: Jessica Kingsley.  Hampe, R. Stalder, P. (2008). Grenzüberschreitungen. Berlin: Frank &amp; Timme  Hampe, R., Martius, P., Ritschl, D., Sprei, F.v. &amp; Stalder, P. (2008). KunstReiz. Berlin: Frank &amp; Timme.  Hogan, S. &amp; Waller, D. (2003). Gender Issues in Art Therapy. London: Jessica Kingsley.  Landgarten, H.B. (1990). Klinische Kunsttherapie: Ein umfassender Leitfaden. Karlsruhe.  Moss, J. (2006). How to succeed with inclusive schools. Curriculum Cooperation. Calton South.  Oaklander, V. (1984). Gestalttherapie mit Kindern und Jugendlichen. Stuttgart.  Rubin, J.H. (Hrsg.) (1991). Richtungen und Ansätze der Kunsttherapie: Theorie und Praxis. Karlsruhe.  Waller, D. &amp; Mahny, J. (1999). Treatment of Addiction. Current Issues for Arts Therapies. London/New York: Routledge.</p> <p>An updated literature list will be handed out at the beginning of the course.</p>					
Teaching and Learning Form	Lecture x	Seminar x	Excursion x	Exercise Course x	Tutorial	Project
Amount of work (in hours)	270					
Contact Hours (in lessons/ lessons per semester)	90					
Self-Study (in hours)	180					
Credits	9					
Level	3					
Kind of Performance	Written paper (graded)					

<b>Competence 6</b>	<b>Compiling a Master Thesis</b>					
<b>Module</b>	<b>6.1 Master Thesis / Master colloquium</b>					
Course Title	6.1.1 Synopsis, development of and preparation for defence 6.1.2 Colloquium					
Compulsory Subject/Compulsory Optional Subject	P					
Lecturer	Hampe, Hulshof, Junker, Menzen and others					
Language	English (national language)					
Semester	Third Semester					
Places	20					
Registration						
Contents/ Teaching and Learning Objects and Qualification Targets / Competences	<p>The research work involves the application of empirical methods and the collection and interpretation of data regarding an artistic therapeutic work field. The aim is to start up an exchange of the research project, the research design and the research methods in the process of securing data collection and artistic therapeutic project development. Counselling and supervision play a supportive and corrective role in quantitative and qualitative social research in relation to innovative project development in artistic therapeutic occupational fields. Compilation of the Master thesis and its academic defence are directly related to this.</p> <p><b>Aims:</b></p> <ol style="list-style-type: none"> <li>Getting to know, understanding and applying research projects and approaches in Arts Therapies and contiguous disciplines by means of examples. Development of a research design with methodical conceptualisation and practical implementation in exchange with participants of the research colloquium. Compilation of a Master thesis in a scientifically adequate form.</li> <li>Presentation and substantiation of the Master thesis within the colloquium. Defence of the thesis in a critical dispute with the examiners.</li> </ol> <p><b>Contents:</b></p> <ol style="list-style-type: none"> <li>Supervision and counselling of the arts therapeutic research work. The application of approaches of qualitative and/or quantitative social research with regard to arts therapeutic fields of reference. The interpretation of results of research work and a comparison with the current research status. Exposition and justification of the student's own research design through use of the applicable methods. Reflection of other research designs and methods in relation to approaches to the social sciences. Compilation of the Masters thesis as academic research paper.</li> <li>Exposition and justification of the student's own research design with the applied methods in reflection of other research designs and methods. The presentation of essential research results of the Masters thesis. Defence of the Master thesis in the colloquium.</li> </ol> <p><b>Competences:</b></p> <p><u>Professional competence</u> in compiling a Master thesis by applying acquired research perspectives in relation to arts therapeutic fields of application, and in the ability for critical reflection in defence of the thesis = 40%</p> <p><u>Method competence</u> in the application of research methods with regard to a developed research design = 30%</p> <p><u>Interdisciplinary competence</u> in the implementation of scientific research approaches in the student's own study and in the presentation of the research results = 10%</p> <p><u>Key qualifications</u> in the implementation of an artistic therapeutic research objective and in the presentation of specific arts therapeutic research results = 20%</p>					
Literature	Subject-related literature information					
	An updated literature list will be handed out at the beginning of the course.					
Teaching and Learning Form	Lecture	Seminar x	Excursion	Exercise Course	Tutorial	Project

Amount of work (in hours)	540
Contact Hours (in lessons/ lessons per semester)	45
Self-Study (in hours)	495
Credits	18
Level	4
Kind of Performance	<p>6.1.1 THESIS (graded) as a written Master Thesis comprising 60-80 pages</p> <p>6.1.2 Colloquium – Defence of the Master Thesis (graded) as oral examination with presentation of the Thesis (10 minutes) and following critical discussion (20 minutes) with the examiners for the defence of the Thesis.</p>