Creative Forces® Basic Glossary

Creative Forces Programs

Creative Forces Clinical Programs: Creative Forces places creative arts therapies at the core of patient-centered care at military medical and Veterans Health Administration facilities, including telehealth delivery of care for patients in rural and remote areas. In clinical settings, creative arts therapists provide art, music, and dance/movement therapies for military patients and veterans.¹

In the Creative Forces clinical programs, creative arts therapists serve on interdisciplinary treatment teams to provide clinical care. As qualified and trained clinicians, creative arts therapists use therapeutic interventions and directives to address behavioral health and rehabilitation to improve patients’ physical, social, and emotional well-being. For example, creative arts therapies can reduce symptoms of post-traumatic stress, provide a means for addressing anxiety, improving cognitive functioning, and improving social functioning.

Creative Forces Community Engagement Programs: In addition to its clinical programming, Creative Forces is committed to improving the health, well-being and quality of life for military and veteran populations who have been exposed to trauma, including their families and caregivers, through community arts engagement programming. Since 2017, Creative Forces has invested in community arts engagement activities in order to advance understanding of their benefits and impacts for targeted military-connected populations exposed to trauma.¹

Within Creative Forces, Community Arts Engagement supports non-clinical arts engagement programs taking place in healthcare, community, or virtual settings. Under the guidance of community arts practitioners, arts in health professionals, or creative arts therapists, participants engage in the arts to enhance creative expression, build relationships, become more resilient, and adapt to civilian life.
Creative Arts Therapists (CATs): trained behavioral health and rehabilitation professionals who use their respective disciplines of art therapy, dance/movement therapy, music therapy, drama therapy and poetry therapy as a pathway for communicating and processing nonverbal emotions and experiences. They assess and identify presenting symptoms and engage patients in creative arts therapies to work towards specific treatment goals co-created in the context of a therapeutic relationship.

Creative Arts Therapies: include the distinct regulated health professions of art therapy, dance/movement therapy, drama therapy, music therapy, poetry therapy, and psychodrama. Nationally credentialed creative arts therapists use their particular art form toward achieving clinical and therapeutic outcomes. Each of the professional disciplines possess a definition of the profession, a legally defensible scope of practice, educational competencies, standards of practice, a code of ethics, and evidence-based research. Creative arts therapists share the feature of encouraging creative expression through a specific art form. However, each profession stands alone as distinct. Currently, creative arts therapies provided through Creative Forces clinical programs include art therapy, dance/movement therapy and music therapy. See individual definitions below.

Within Creative Forces, community arts engagement, arts in health and clinical creative arts therapies all utilize the arts to promote and advance health and well-being as informed by their distinct education, training and backgrounds of their respective fields. The creative arts therapies are clinical activities that utilize the arts to work towards specific treatment goals co-created in the context of a therapeutic relationship. Community arts engagement and arts in health activities are non-clinical activities that provide opportunities for creative engagement and expression that support health and well-being.  

Art Therapy: a mental health and human services profession that enriches the lives of individuals, families, and communities through active art-making, creative process, and applied psychological theory and human experience within a psychotherapeutic relationship.

Dance/Movement Therapy: the psychotherapeutic use of movement to promote emotional, social, cognitive, and physical integration of the individual for the purpose of improving health and well-being. Their focus is on working with the natural intelligence of the mind-body connection throughout treatment.
Music Therapy: the clinical and evidence-based use of music interventions to accomplish individualized goals within a therapeutic relationship by a credentialed professional who has completed an approved music therapy program, clinical internship, and earned board-certification as a music therapist.

Arts in Health: a field dedicated to using the power of the arts to enhance health and well-being in diverse institutional and community contexts. Comprised of many subfields and affiliated fields, arts in health supports health as defined by the World Health Organization (WHO), as “a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity.” The subfields of arts in health include arts in healthcare and arts in community health. Arts in healthcare is the domain that pertains to using the arts within clinical settings, and arts in community health pertains to using the arts within community or public health settings. Creative Forces Community Engagement grant activities fall within both subfields.

Arts in Health Professionals: individuals, including but not limited to artists and arts administrators, who apply their professional knowledge and skills to enhance health and well-being through the arts, ensuring participant safety and program effectiveness, and working within their qualifications drawn from experience, training, and education.
Health and Wellbeing Terminology

The definitions for the below terms are taken from the Federal Plan for Equitable Long Term Recovery and Resilience (Federal Plan for ELTRR), which lays out an approach for federal agencies to cooperatively strengthen the vital conditions necessary for improving individual and community resilience and well-being nationwide. The Federal Plan for ELTRR was developed by a large Interagency Workgroup made up of representatives from across the federal government and is inclusive of health and non health sectors.

**Behavioral health:** Behavioral health means the promotion of mental health, resilience, and well-being; the treatment of mental and substance use disorders; and the support of those who experience and/or are in recovery from these conditions, along with their families and communities.7

**Community:** a group of people with diverse characteristics who share a common defined geographic location.8
Community resilience: the ability of individuals and households to prepare for anticipated hazards, adapt to changing conditions, and withstand and recover rapidly from disruptions.9 When disasters occur, recovery depends on the community’s ability to withstand the effects of the event.10

Health: Health encompasses many aspects, including physical, mental, social, and spiritual well-being. The World Health Organization also notes that health is “not merely the absence of disease or infirmity.”11

Population: A group or number of people sharing similar characteristics, identity, or sense of belonging who may or may not share a geographic location.12

Social determinants of health: the conditions in the environments where people are born, live, learn, work, play, worship, and age that affect a wide range of health, functioning, and quality-of-life outcomes and risks.169

Well-being: the presence of positive emotions and moods, the absence of negative emotions, satisfaction with life, fulfillment, and positive functioning. Types can include, but are not limited to, physical, economic, social, and emotional well-being. The term can also refer to entire communities, in addition to individuals.175

References

7. “Behavioral Health Integration. Substance Abuse and Mental Health Services
Administration,” XXXX. https://www.samhsa.gov/sites/default/files/.


13. Ibid.