

ORIGINAL

Art Therapy for Kindergarten Children in the Israeli Education system: the Perspective of Creative Art Therapists

Terapia Artística para Niños de Jardín de Infancia en el Sistema Educativo Israelí: la Perspectiva de los Terapeutas de Arte Creativo

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ABSTRACT

Este Art therapy uses creative visual expression to foster emotional and social development in children aged 3-6. Its effective implementation in early childhood depends on multiple factors related to the child, the therapist, the school, and the broader environment. Among these, the therapist's role is central, as their approach directly shapes therapeutic outcomes. Despite increasing interest in art therapy for young children, limited research has examined how therapists apply and experience it in educational settings, particularly in Israeli kindergartens. This study explores the perspectives of 15 creative art therapists working in such contexts to identify their challenges, practices, and the factors that facilitate or hinder therapy. Using a qualitative, descriptive-interpretive design with thematic analysis based on semi-structured interviews, the findings reveal varied experiences among therapists. The results highlight the importance of supportive school environments, collaboration with educators, and specialized professional training to enhance the effectiveness of art therapy in early childhood education.

Keywords: Art Therapy; Kindergarten; Israeli Educational System; Art Therapists' Perspective.

RESUMEN

La terapia artística utiliza la expresión visual creativa para promover el desarrollo emocional y social de los niños de 3 a 6 años. Su implementación efectiva en la primera infancia depende de múltiples factores relacionados con el niño, el terapeuta, la escuela y el entorno en general. Entre ellos, el papel del terapeuta es fundamental, ya que su enfoque influye directamente en los resultados terapéuticos. A pesar del creciente interés en la terapia artística para niños pequeños, existe poca investigación sobre cómo los terapeutas la aplican y experimentan en contextos educativos, especialmente en los jardines de infancia israelíes. Este estudio explora las perspectivas de 15 terapeutas de arte creativo que trabajan en dichos contextos, con el objetivo de identificar los desafíos que enfrentan, sus prácticas y los factores que facilitan o dificultan la terapia. A través de un diseño cualitativo descriptivo-interpretativo y un análisis temático basado en entrevistas semiestructuradas, los hallazgos revelan experiencias diversas entre los terapeutas. Los resultados destacan la importancia de entornos escolares de apoyo, la colaboración con los educadores y la formación profesional especializada para mejorar la eficacia de la terapia artística en la educación infantil.

Palabras clave: Terapia artística; Jardín de Infancia; Sistema Educativo Israelí; Perspectiva de los Terapeutas de Arte.

INTRODUCTION

Art therapy has emerged as an important psychotherapeutic approach that uses creative visual expression to enhance emotional, social, and cognitive development. Since its formal establishment in the 1940s, art therapy has evolved into a multidisciplinary field combining elements of psychology, education, and the arts.⁽¹⁾ Internationally, art therapy has been implemented across diverse contexts—including hospitals, rehabilitation centers, and schools—to support individuals facing emotional, behavioral, or developmental challenges.^(2,3) In many countries, such as the United States, the United Kingdom, and Canada, art therapy in early childhood education has been recognized for improving emotional resilience, self-expression, and interpersonal skills.⁽⁴⁾

Globally, growing evidence highlights its positive outcomes in children aged 3-6 years, including reductions in anxiety and behavioral problems and improvements in self-awareness, communication, and social interaction.⁽³⁾ However, despite its wide application, studies have noted variations in implementation depending on educational systems, therapist training, and institutional support.⁽⁵⁾ In Israel, art therapy is formally integrated into the national education system and represents a core component of emotional support services. According to the Israeli Ministry of Education, approximately 3 000 certified art therapists currently serve in schools, with all students in special education and many in general education having access to such services.⁽⁶⁾ Nevertheless, existing research has focused primarily on school-aged children, leaving early childhood—particularly kindergartens—largely underexplored. Although art therapy is recognized for addressing social-emotional challenges among young learners, its practical implementation in kindergartens remains uneven and influenced by factors such as resource allocation, school collaboration, and parental involvement.^(7,8)

Given the global recognition of art therapy's benefits and the limited empirical research on its practice in early childhood education in Israel, this study provides valuable insights into how art therapy can be optimized to meet young children's emotional and developmental needs. The findings are expected to inform policy, enhance professional training, and promote collaboration between educators and therapists to strengthen emotional support within the education system. However, this study seeks to address this gap by exploring the perspectives and lived experiences of creative art therapists working in Israeli kindergartens. Understanding their perceptions, challenges, and practices is essential for improving therapeutic outcomes and supporting effective program integration within early childhood education. Thus, this study aims to analyze the experiences and perceptions of art therapists in Israeli kindergartens to identify the key factors that facilitate or hinder the effective implementation of art therapy in early childhood educational settings.

METHOD

This study employed thematic analysis as outlined by⁽⁹⁾. To analyse qualitative interview data. This method was chosen because it enables the systematic identification and interpretation of patterns and themes within participants' responses. An inductive approach guided the analysis, allowing themes to emerge directly from the data rather than from preexisting frameworks.⁽¹⁰⁾ The analysis process followed the main stages of thematic analysis: familiarization with the data, generation of initial codes, searching for and reviewing themes, defining and naming themes, and producing the final report. The descriptive-interpretive approach.⁽¹¹⁾ complemented the analysis by ensuring both accurate representation of participants' experiences and meaningful interpretation of their perspectives. Semi-structured interviews provided rich and detailed data, enabling an in-depth understanding of art therapists' experiences and the factors influencing their practice in kindergartens.

Participants

The target population of this study was art therapists in the Israeli education system from which a representative sample (N=15) was selected using purposive sampling method for recruitment and thematic saturation method for sample size determination. The selection criteria for purposive sampling were art therapists with (1) a master's degree in art therapy, (2) employment through the Ministry of Education, with at least 3 years of professional experience, and (3) at least 1 year of experience providing art therapy to children eligible for therapy within a kindergarten setting. These criteria were used to ensure that the participants had direct experience in the field, which enabled them to understand, relate to, and share their experiences with art therapy. The sample size was determined through recruitment through a dedicated WhatsApp group invitation for Arab art therapists until thematic saturation was achieved; that is, no new themes emerged from the interviews. These two regions had better accessibility, professional networks, and availability of therapists who met the inclusion criteria. (for details of participants, see table 1). All held MA degrees in art therapy and were fluent in Hebrew and Arabic.

Table 1. Respondent's demographic characteristics data analysis		
Sample characteristic	Category	Number of Art Therapists
Gender	Female	15
Region	North	10
	Central	5
Social status	Single	4
	Married + children	10
	Divorced + children	1
Experience with early childhood art therapy (average=7years)	0-7 years	12
	7-15 years	3
Years Working with Early Childhood in Other Frameworks (average = 5 years)	0-5 years	13
	5-10 years	2

Semi-Structured In-Depth Interviews

Semi-structured in-depth interviews were conducted to explore the experiences and perspectives of art therapists while allowing flexibility to pursue themes raised by participants.⁽¹²⁾ The interview schedule was carefully developed based on an extensive review of the literature to ensure coverage of all relevant topics and alignment with the study's objectives. It included sections on personal and professional background (12 questions), therapeutic approaches and methods (11 questions), challenges in the field (7 questions), future perspectives (3 questions), as well as an introduction and closing segment addressing personal details and additional input. The questions were designed to be clear, open-ended, and non-leading to allow participants to provide rich and detailed insights. To ensure content validity and clarity, the interview schedule was reviewed by three experts in art therapy and qualitative research and pilot-tested with two art therapists, leading to minor adjustments. Interviews were conducted in Hebrew and Arabic at times and locations convenient for participants, lasting 45-70 minutes, either in person or via Zoom, recorded, and transcribed by the interviewers. Four native Arabic-speaking researchers conducted the interviews, each managing a subset of participants, and data collection took place from January to February 2025.

Recording and Transcription of Interviews

The interviews conducted in face-to-face meetings were recorded using a recording device, whereas Zoom meetings were recorded using the platform's recording feature. Each recording was secured with a passcode to protect the participants' privacy. The recordings were stored securely upon completion of the transcription process. The transcriptions were performed by the primary researchers of the study rather than an external entity, ensuring the confidentiality of the participants. The transcription process was assisted by the Transkriptor application. After transcription, the entire content was reviewed by listening to the recordings again and verifying the accuracy and alignment of the transcribed data.

Ethical Approval and Research Credibility

The study was approved by the Ethics Committee of the Chief Scientist of the Ministry of Education, and this approval was communicated to the participants as part of the informed consent process. Verbal consent was obtained from the participants before the interviews began. The interviews were conducted in a neutral location where the participants felt comfortable, ensuring confidentiality. The study focused on maintaining confidentiality and anonymity of the participants.⁽¹³⁾ Participants were assured their opinions were valued, all responses were valid, their privacy would be fully protected, and their responses would be used only for research purposes.^(14,15) Due to the sensitivity of the topic, extra precautions were taken to ensure confidentiality during data collection and analysis. Participants were explicitly informed that sensitive topics could arise and they were not obligated to answer all questions and also had the right to withdraw from the study at any time. All participants voluntarily agreed to participate in the study and signed an informed consent form before the interview. This rigorous ethical framework ensured that the study adhered to professional ethical standards while maintaining the integrity and confidentiality of the participants' data.

Role of the Researcher

The author, a trained art therapist within the educational system, approached this study with a professional commitment to understanding and improving art therapy practices in early childhood education. While the researcher's experience informed the study design, effort was made to bracket personal assumptions during data

collection and analysis. The researcher aimed to maintain neutrality throughout the interview process. Personal perspectives or professional biases regarding art therapy were intentionally withheld during the interviews to avoid influencing participants' responses. The focus remained on the participants lived experiences and viewpoints, and the semi-structured format allowed them to guide the conversation in directions that were meaningful to them. To minimize researcher bias, several strategies were employed throughout the research process. First, the researchers engaged in reflexivity, continuously reflecting on their own assumptions to prevent unconscious biases from affecting the data analysis. Second, the four primary researchers independently coded the data, followed by collaborative discussions to refine the emerging themes. This approach ensured that data interpretation was not shaped by a single researcher's perspective. Third, a member-checking process was implemented, where participants reviewed the interpreted findings to confirm that their experiences were accurately represented, thereby reducing the risk of misinterpretation. Finally, the thematic categorization was cross-checked multiple times to maintain consistency and ensure that the findings were directly derived from the participants' narratives. These measures addressed possible researcher biases and strengthened the study's credibility and reliability, ensuring that the results were based on the participants' perspectives rather than the researchers' preconceptions.

Thematic Analysis Procedure

Data analysis followed the descriptive-interpretive approach proposed by ⁽¹¹⁾. Each of the four primary researchers read all transcripts of their interviews multiple times to become immersed in the material. Initial meaning units were identified and labeled with inductive codes. The codes were subsequently discussed collectively until full consensus was achieved to refine and consolidate the emerging themes. Codes were then grouped into subthemes and overarching themes, capturing the therapists' shared experiences. The analysis process was a collaborative effort among the four primary researchers, all of whom are native Arabic speakers with expertise in art therapy. This collaborative approach ensured a thorough and consistent analysis, enhancing the reliability and validity of the findings. The following processes were applied to the transcribed data during analysis.

Initial Coding

Each researcher independently reviewed and transcribed the interviews. The transcriptions were then cross-checked for accuracy by re-listening to the recordings and verifying their alignment with the original content.

Open Coding and Identification of Key Themes

Each researcher performed open coding on the interviews they transcribed, identifying recurring concepts and assigning initial labels (codes) to meaningful segments of text. This inductive approach enabled key themes to emerge directly from the data, which were later grouped into broader categories during axial coding. The codes were presented to the researchers, and discussions were held to refine and consolidate the emerging themes.

Thematic Categorization and Consensus Building

The researchers collaboratively reviewed and compared the coded data and discussed similarities, differences, and overlaps between categories. Through joint discussions, key themes were defined, ensuring that they emerged directly from the data rather than from pre-existing theoretical assumptions.

Final Refinement and Verification

Once the core themes were established, all researchers revisited the transcriptions to ensure that no important insights were overlooked. The final thematic structure was reviewed multiple times to ensure consistency and validity. This collaborative approach ensured a rigorous and transparent data analysis process, allowing multiple perspectives to contribute to the interpretation of the findings while maintaining fidelity to the participants' narratives.

The Reliability and Validity of the Study Findings

To ensure rigor and trustworthiness in this qualitative study, the analysis was carefully structured according to the purpose and scope of the research, which aimed to explore the lived experiences and perceptions of art therapists working in kindergarten settings. The primary data source consisted of in-depth, semi-structured interviews, providing rich, first-hand insights necessary for capturing participants' personal and professional experiences. Interviews were transcribed verbatim and analyzed using thematic analysis, ⁽⁹⁾ following an inductive, descriptive-interpretive approach. The four researchers who conducted the interviews independently coded the transcripts, identifying meaning units, patterns, and recurrent ideas. These codes were then compared and discussed in team meetings to achieve consensus-based coding, leading to the generation of categories,

themes, and subthemes that reflected both commonalities and variations in participants' experiences. To enhance the validity and credibility of the findings, a member-checking process was employed.⁽¹⁶⁾ Summaries of the preliminary themes and interpretations were shared with participants, allowing them to verify, clarify, or correct any misinterpretations. Their feedback was incorporated into the final analysis, ensuring that the study's conclusions accurately represented their perspectives. This systematic approach to data analysis, combining rigorous coding with participant validation, strengthened the trustworthiness of the study and provided a thorough understanding of the factors influencing the implementation of art therapy in kindergarten settings.

RESULTS

Analysis of the interview transcripts, following the procedures described above, revealed six main themes that capture the key factors influencing the practice of art therapy in kindergarten settings. These themes included the impact of therapists' background, the influence of group dynamics and the setting, the significance of relationships, therapists' perceptions and practices, the challenges encountered, and pathways to success. While all themes contributed to understanding the participants' experiences, this study highlights those most directly related to the effectiveness and implementation of art therapy. Figure 1 presents a summary of the main themes and associated subthemes. Subsequent sections elaborate on the most relevant findings, emphasizing the factors that facilitate or hinder successful therapeutic practice, as reflected in participants' narratives.

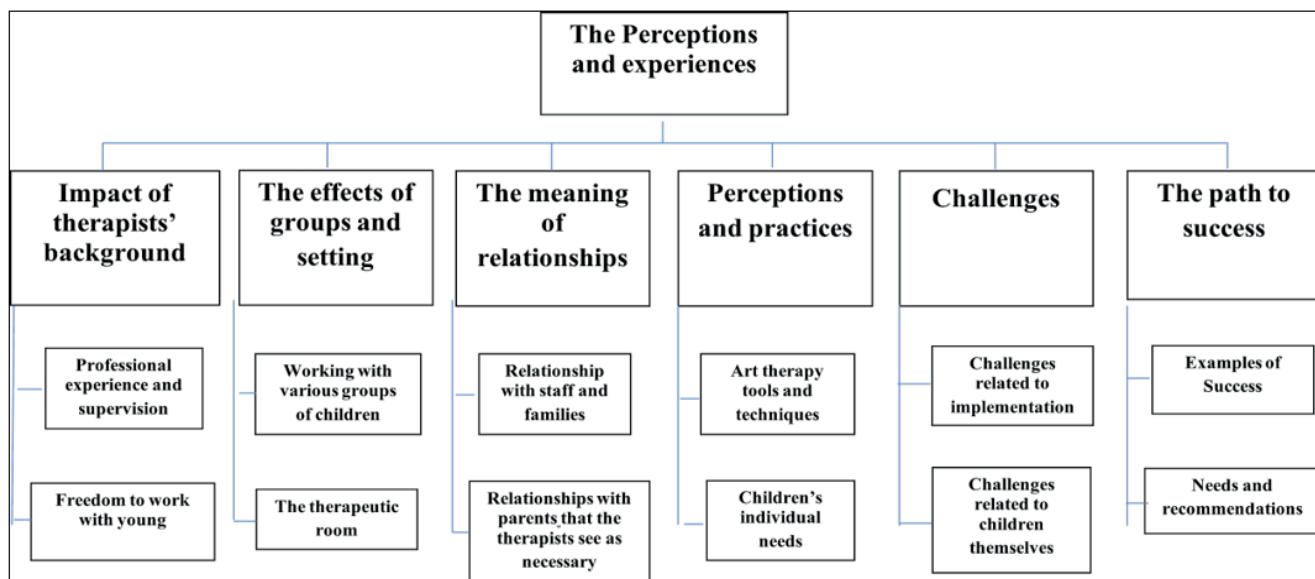


Figure 1. Flowchart Depicting the Themes and Subthemes That Emerged in This Study

Impact of therapists' background

The professional background and freedom of choice of the art therapists served as a basis for their implementation of art therapy in the kindergarten classes and were the sub-themes for this theme.

Professional Experience and Supervision

All participants had prior experience in art therapy, ranging from 3 to 15 years, while experience specifically with early childhood ranged from 1 to 10 years. In terms of professional background, 40 % had education degrees, 35 % had special education qualifications, and 25 % had counseling training. Most therapists (approximately 70 %) worked in kindergartens and nurseries, while 30 % also offered private services. Regarding supervision, 60 % received regular oversight—weekly, bi-weekly, or monthly—through the Ministry of Education, MATYA, or private arrangements, whereas 10 % reported having no current supervision. These professional experiences and supervision patterns shaped participants' perspectives on art therapy, influencing their approaches, therapeutic practices, and responses to challenges in working with young children.

Freedom to Work with Young Children

All therapists reported that working with this age group was not their choice but assigned. Some expressed difficulty, particularly in engaging with unaware or uncooperative parents. However, a few described emotional fulfillment working with young children, highlighting their innocence and responsiveness.

Effects of Groups and Settings

Therapists' responses regarding the children they worked with and the spaces they used to provide art

therapy form two sub-themes under this theme. Working with various groups of children, art therapists reported working with diverse groups, such as children with behavioral and psychological disorders, developmental delays, special needs such as autism, speech delays, delayed growth, learning difficulties, health difficulties, challenges related to parental divorce, less self-esteem and low self-confidence. One therapist noted: "I work with diverse groups, including children with special needs and those facing emotional challenges such as anxiety, separation problems, psychological disorders, autism, intellectual disabilities, and other challenges". Working with varied groups of children has a significant impact on the therapy itself according to the therapists as it influenced the activities and tools to be chosen to develop skills, meet children's unique needs to express their feelings and enhance their creative abilities. Few therapists suggested psychological support for some children when required. The therapeutic room, most therapists described the therapy rooms as inappropriate: often storage spaces lacking ventilation, lighting, and privacy. One therapist described, "The storage room was accessible to everyone. Children would knock on the door. Even after speaking with the teacher, staff would still enter. I felt it was inappropriate, but the child didn't understand why. The concept of therapy wasn't clear." This example reflects how unsuitable environments can undermine the therapeutic process.

The Meaning of Relationships

Important relationships envisaged by the therapists to ensure effective art therapy sessions include those with parents, teachers, and other therapeutic teams. Two sub-themes were formed here where one was the relationships that existed, and the other was the ones felt as required for better implementation of art therapy. Relationship with staff and families: Therapists had mixed experiences with teachers and parents. While some educators were cooperative, others lacked awareness or dismissed therapy. One therapist shared: "Relationships were mostly complex. Many parents didn't take our advice seriously. They thought, 'It's just drawing or playing—we do that at home.'" Still, other parents were receptive, especially when their child had a health condition. Some therapists reported good collaboration with psychologists and aides, though coordination varied. Moreover, relationships that the therapist sees as necessary: Therapists felt that for successful implementation of art therapy, it was necessary to connect with psychologists, other principals, assistants, and teachers.

Art Therapy Tools and Techniques

Therapists used a wide range of expressive tools (e.g., paint, clay, foam, cards, movement, role-play). Creativity and adaptation were emphasized, especially for children with special needs. One therapist noted avoiding traditional tools and using scrap materials to spark creativity. Regarding the goal of art therapy, one therapist stated: "This type of therapy helps the child adapt to the demands of their generation".

Children's Individual Needs

Therapists stressed personalized approaches, adjusting to children's sensitivities and communication styles. For example, tactile-avoidant children were offered visual or symbolic tools. Emotional attunement, patience, and simple language were essential as echoed by a therapist who said, "The biggest challenge is the difficulty of verbal communication because children at this age have not fully developed their language, so it can be hard to understand what they want to express."

Challenges

Participants described various challenges in their work, which fell into two main categories: implementation-related and child-related factors. Implementation-related challenges included limited resources, irregular schedules, lack of understanding or cooperation from school staff, societal stigma, insufficient support from principals, and low parental engagement, as well as the emotional weight of their work and blurred boundaries between educational and therapeutic roles. Child-related challenges arose from the children themselves, including resistance to therapy, difficulty remaining engaged for the full session, preference for other activities, limited verbal language development, and strong attachments to teachers that sometimes-hindered participation. Together, these implementation and child-related factors illustrate the complex interplay of institutional, environmental, and individual influences on the effectiveness and delivery of art therapy in kindergarten settings.

The Path to Success

The theme of the path to success encompassed both examples of therapeutic impact and the needs and recommendations identified by therapists. Participants described cases in which art therapy facilitated significant emotional growth, such as helping a child with a rare health condition express her fears and prepare for surgery, illustrating the profound influence of therapy even on very young children. Therapists also highlighted the need for professional development, awareness programs, adequate therapy spaces, resource

kits, policy adjustments, and sufficient budgets for materials, modern games, and expanded therapy hours. Several emphasized involving parents more directly, integrating art therapy into broader school frameworks, and providing ongoing guidance and counseling support. Professional experience, supervision, and freedom of practice shaped therapists' attitudes and effectiveness, while the diversity of children's needs required tailored approaches and creative adaptation of techniques and materials. Despite supportive relationships with teachers, parents, and therapeutic teams, challenges such as limited resources, resistance from children or school staff, and inadequate therapy spaces persisted. Overcoming these obstacles demanded creativity, patience, and collaboration, underscoring the combination of impactful therapeutic outcomes, resource needs, and future recommendations for effective implementation of art therapy in kindergarten settings.

DISCUSSION

The purpose of this study was to explore the experiences and perceptions of art therapists working in kindergarten settings in Israel, with a focus on identifying the factors that facilitate or hinder the effective implementation of art therapy. The findings reveal that therapists' professional backgrounds, work environments, supervision, and collaboration with educators and parents significantly shape their practices and perceptions. Analysis of the results shows that therapists' experiences range from the fulfillment of fostering children's emotional and social development to facing practical challenges such as limited resources, inadequate therapeutic spaces, inconsistent schedules, and low awareness of the importance of art therapy. These findings align with previous research emphasizing the central role of professional experience and supervision in effective therapeutic practice^(17, 18) and the necessity of safe, supportive environments for children.^(1, 19) The study further highlights the critical role of relationships in therapy. Strong collaborations with parents and educators enhance the success of interventions, consistent with prior studies indicating that parental involvement significantly influences children's progress.⁽¹³⁾ Conversely, challenges such as poor communication with teachers or lack of understanding from school staff reflect similar barriers identified in earlier research.⁽⁶⁾ Regarding therapeutic practices, therapists employed creative and adaptive methods—drawing, storytelling, movement, and role-playing—to meet the individual needs of children. These approaches resonate with previous studies^(1, 18) and demonstrate the flexibility required to respond to diverse developmental and emotional needs. The study also emphasizes the interplay between institutional support, availability of resources, and the therapists' creativity, illustrating how systemic and individual factors collectively influence therapy outcomes. In terms of challenges and paths to success, the analysis reveals that institutional constraints, lack of resources, and societal perceptions hinder the effectiveness of therapy, while creativity, professional training, dedicated spaces, and increased awareness among educators and parents facilitate positive outcomes. These insights reinforce existing literature on the importance of structural and professional support in therapeutic interventions.

CONCLUSION

This study aimed to explore the experiences and perceptions of art therapists working in kindergarten settings and to identify factors that facilitate or hinder the implementation of art therapy. The findings indicate that successful practice depends on the interplay of therapist expertise, institutional support, collaboration with parents and educators, and the adaptability of therapeutic methods to children's diverse needs. Art therapy in early childhood education plays a crucial role in supporting emotional and social development, fostering self-expression, and creating safe environments for children to explore their feelings. The study's qualitative design limits generalizability, as participants were drawn from only the northern and central regions of Israel, and other data sources, such as observational records or supervision logs, were not included. Nevertheless, the themes and insights generated provide valuable guidance for practitioners, policymakers, and future researchers.

Practical implications include the need for professional development and supervision, dedicated therapeutic spaces and resources, ongoing collaboration with teachers and parents, and flexibility in therapy approaches to meet individual needs. Future research could expand the participant pool to include diverse cultural and educational contexts, incorporate multiple data sources, and examine perspectives of other stakeholders, such as teachers, parents, and children, to provide a more comprehensive understanding of factors influencing the success of art therapy. Observational studies are also recommended to complement self-reported data and directly assess the implementation and effectiveness of therapy in early childhood education.

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