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Accompaniment in Art Therapy: Between Ethical Vocation, Relational Paradigm, and Professionalization Processes

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Abstract

The aim of the article is to analyse the category of “accompaniment” in art therapy as a relational paradigm situated between vocational mission and professionalization, as well as to demonstrate its significance for therapeutic practice and participants’ creative processes. The research problem concerns the tension between the mission-oriented character of art therapy and its institutional professionalisation, as well as the role of accompaniment as a relational category. The study adopts a theoretical and analytical approach based on a review of the literature and pedagogical, sociological, and philosophical theories (including those of Rogers, Buber, Lévinas, and Bourdieu). Methodological and autoethnographic reflection was also employed, together with references to research on the therapeutic alliance. The argument begins with a definition of accompaniment as a dialogical and non-dominating relationship, followed by a discussion of the cultural and social transformations of this concept. Subsequent sections address art therapy as a field shaped by tensions between mission and professionalisation, models of professional identity among art therapists, and the significance of the therapeutic relationship. The article concludes with a reflection on the design of art-therapeutic encounters and the role of the therapist’s reflective presence. The analysis indicates that accompaniment constitutes a key element of effective art therapy practice, supporting emotional regulation, a sense of safety, and the creative process. It enables the reconciliation of participants’ autonomy with the therapist’s professional responsibility. The study also highlights the importance of relational competencies, such as empathy, authenticity, and reflectiveness, which significantly influence therapeutic effectiveness. Accompaniment should be understood as the therapist’s conscious, reflective, and ethical presence, combining empathy with professional responsibility and respect for the participant’s autonomy within the creative process. The findings indicate the need to strengthen relational competencies in the education of art therapists, as well as to further develop research on the relational dimensions of therapy, while maintaining a balance between vocational mission and professionalisation.

Keywords: art therapy, therapeutic accompaniment, therapeutic relationship, professionalisation, relational competencies.

Introduction

In this article, accompaniment is proposed as a relational and ethical framework for understanding therapeutic presence and professional practice. It represents a relational paradigm that informs diverse fields, including education, psychotherapy, social work, healthcare, and community arts practice.

Its intellectual roots lie in dialogical pedagogy, personalist philosophy, and humanistic psychology, all of which emphasise human dignity, subjectivity, interpersonal encounter, and ethical responsibility in processes of growth and development.

Accompaniment refers to a mode of being with another person that resists instrumentalisation. Rather than directing or controlling, it recognises the other as an autonomous subject whose experiences, meanings, and processes of becoming cannot be reduced to externally imposed objectives. It privileges dialogue over instruction, mutual responsiveness over hierarchy, and shared responsibility over domination. From the perspective of developmental pedagogy informed by phenomenology and personalism, accompaniment assumes that human development is not the linear implementation of an educator's predetermined plan but an emergent process that unfolds within the lived experience of the individual.

Although accompaniment has traditionally been associated with spiritual direction, within psychology and psychotherapy it has acquired a distinctly existential and relational meaning. Rogers (1957, pp. 95–103; 2018, pp. 47–65) argued that personal growth occurs in a relational climate characterised by empathy, congruence, and unconditional positive regard, supporting processes of self-directed growth and personal development. Likewise, Buber's (1992, pp. 45–68) concept of the *I–Thou* relationship frames authentic encounter as one in which the other is not constituted as an object of knowledge but acknowledged as a fully legitimate subject. From a therapeutic perspective, accompaniment entails an ethically grounded presence sustained through emotional co-regulation and the cultivation of psychological safety, echoing Lévinas's (1998, pp. 197–215) philosophical notion of ethical responsibility toward the Other. In this sense, accompaniment is not a neutral or passive stance but an ethical response to another person's vulnerability or lived need. Crucially, however, it neither assumes authority over the other's life nor appropriates their agency, decision-making, or personal goals.

Within art therapy, an interdisciplinary field situated at the intersection of art, psychotherapy, and education, accompaniment acquires particular significance because it is enacted within the creative process itself. Creative expression is inherently open-ended, symbolic, and often unpredictable, requiring a relational approach that supports exploration without directing outcomes. Consequently, accompaniment in art therapy extends beyond facilitating artistic activity; it involves sustaining a relational space in which meaning, agency, and transformation can emerge through creative engagement.

At the same time, accompaniment cannot be understood independently of its broader social and cultural context. Contemporary forms of relational practice are increasingly shaped by profound transformations in the ways interpersonal relationships are established, mediated, and sustained. These changes invite renewed reflection on the meaning of accompaniment and on the conditions under which it can continue to function as an ethically grounded and developmentally supportive practice in contemporary society.

Accompaniment as a Cultural and Relational Category

Accompaniment is not a static concept but one that evolves in response to broader social, political, economic, cultural, and generational transformations. Contemporary technological developments have fundamentally reshaped understandings of relationality, including the meaning of what it means to be a *companion* or to accompany another person. Within the generational cohorts commonly distinguished in sociological research, particularly Generation Z and Generation Alpha, accompaniment increasingly assumes a functional and hybrid character, enacted through both interpersonal relationships and digital technologies, including artificial intelligence and interactive applications. Among Millennials, accompaniment tends to be understood primarily in biographical and emotional terms, carrying a strong existential significance linked to life stage, identity formation, and lifestyle. In contrast, for older generations, such as Generation X and the Baby Boomers, the term may retain historical and political connotations that render it ambiguous or even negatively perceived. From Bourdieu's (2008) perspective, these shifts reflect transformations in *habitus* and the social fields within which practices

and meanings are constituted. Consequently, changing understandings of accompaniment affect not only the language through which relationships are described but also the ways accompaniment is enacted in educational and therapeutic practice.

Following Barbier (2016), accompaniment may be understood as an activity system characterised by interconnected transformations, multiple functions, relational interdependence, and contextual situatedness. Drawing on Barbier's conceptualisation of activity, accompaniment may be understood as, first, a dynamic process requiring attention to ongoing and interconnected transformations (p. 37). Second, it is intrinsically interconnected, as individuals simultaneously participate in multiple relational, institutional, and digital contexts, creating overlapping forms of engagement (p. 157). Third, accompaniment is polyfunctional, generating intended as well as unintended consequences across different domains of activity (p. 154). Fourth, it represents a configuration of mutually oriented activities through which participants co-construct a shared space of interaction, participation, and reciprocal action (p. 98). Finally, accompaniment is always situated within mental, situational, and social contexts that shape both its form and its developmental potential (as cited in Kamińska-Jatczak, 2021, pp. 17-18).

From this perspective, accompaniment can be conceptualised not only as a relational experience but also as a methodological category that structures art therapy practice. Rather than functioning solely as an ethical attitude or interpersonal competence, it provides a framework for understanding how therapeutic relationships are initiated, negotiated, and sustained within creative processes that are inherently relational, contextual, and continuously evolving.

Accompaniment as a Relational Paradigm in Art Therapy: A Methodological Perspective

This article adopts a theoretical and reflective approach, combining perspectives from relational pedagogy, psychotherapy theory, sociology of professions, and autoethnographic inquiry to examine accompaniment as a category relevant to contemporary art therapy practice.

Accompaniment may be understood as both an epistemological and an ethical category that redefines the professional relationship as a space of shared presence rather than expert intervention. Within art therapy, this concept acquires practical, ethical, and methodological significance. It does not denote passive presence but instead refers to a reflective and intentional practice shaped by the therapist's professional competencies and grounded in ethical standards. As a relational paradigm, accompaniment offers an alternative to instructional, control-oriented, and procedural models that continue to influence educational and helping professions. It describes a mode of therapeutic presence that respects the participant's autonomy while recognising the symbolic meanings embedded in creative activity.

The centrality of the therapeutic relationship has been consistently demonstrated in psychotherapy research. A foundational contribution is Bordin's (1979) concept of the **therapeutic alliance**, comprising three interrelated components: agreement on therapeutic goals, collaboration on therapeutic tasks, and the emotional bond between therapist and participants (clients/patients in clinical contexts). Extensive empirical evidence has shown that the quality of the therapeutic alliance is among the strongest predictors of therapeutic outcomes. From this perspective, accompaniment may be conceptualised as a relational dimension of the therapeutic alliance that facilitates emotional regulation, symbolic expression, and meaning-making within the creative process. Such an understanding also raises important methodological questions concerning the language used to describe therapeutic presence and the conceptual frameworks through which the therapist-participant relationship is defined.

Research on the effectiveness of therapeutic relationships increasingly integrates two complementary perspectives. On the one hand, it emphasises a **relational logic**, grounded in reflexivity, empathy, authentic presence, and shared responsibility. On the other hand, it acknowledges an **institutional logic**, reflected in professional standards, clinical documentation, supervision, certification, and quality evaluation. Rather than existing in opposition, these perspectives interact to shape contemporary art

therapy practice. Consequently, accompaniment can be understood as a methodological construct that mediates between the ethical foundations of therapeutic relationships and the institutional requirements governing professional practice.

However, the relational ideal of accompaniment does not exist outside institutional realities. Contemporary art therapy must negotiate between relational ethics, professional standards, and the demands of evidence-informed practice.

The methodology adopted in this study encompasses the conceptualisation of the research problem, a critical analysis of relevant theoretical perspectives, the systematic juxtaposition of theoretical assumptions with professional practice, autoethnographic reflection, and the identification of the constitutive dimensions of accompaniment, including participant subjectivity, co-presence, therapist reflexivity, non-directiveness, dialogicality, professional responsibility, and openness to the polysemy of the creative process. This methodological framework enables “accompaniment” to be conceptualised as a category situated at the intersection of relational theory, therapeutic practice, and the professionalisation of the field.

Within the proposed conceptual framework, accompaniment may be understood as a reflexive mode of professional presence in which the therapist assumes active responsibility for establishing and maintaining the framework of the therapeutic process while simultaneously acknowledging the participant’s autonomy, the openness and indeterminacy of meanings emerging through the creative process, and the dialogical nature of the therapeutic relationship. Accompaniment should therefore not be equated with therapeutic withdrawal, passivity, or the relinquishment of professional expertise. Rather, it denotes a particular mode of exercising professional competence—one that remains responsive to the participant’s subjectivity, the contextual specificity of the therapeutic encounter, and the emergent character of the creative process.

This conceptualisation supports a broader proposition: the paradigm of relational accompaniment does not constitute an alternative to established art therapy methods; rather, it provides a relational framework within which such methods are selected, implemented, and interpreted. From this perspective, the therapeutic relationship constitutes the context in which techniques, artistic media, and creative processes acquire potential therapeutic significance. The professionalism of the art therapist therefore cannot be reduced to the possession of a repertoire of techniques. It also encompasses the capacity for sustained reflexive appraisal of the therapeutic situation and for context-sensitive decision-making concerning the appropriate mode and degree of therapeutic intervention. This includes discerning when the process requires greater structure, guidance, or active intervention and when it is more therapeutically appropriate to preserve space for the participant’s autonomous engagement with the creative process.

Such a methodological framework provides a basis for further investigation of accompaniment through the analysis of scholarly literature and professional discourse, as well as through qualitative research addressing the lived experiences and perspectives of art therapists and participants engaged in art therapy. It also creates an opportunity for empirical examination of the extent to which the identified dimensions of accompaniment are reflected in professional practice, how they are interpreted by different actors within the therapeutic process, and under what contextual conditions they may contribute to the development of a relationally grounded model of art therapy practice.

Accompaniment and Partnership: Two Relational Modes in Art Therapy Practice

In contemporary discourse, the term **companion** is increasingly used interchangeably with **partner**. However, the distinction between these concepts is of particular importance in educational and art therapy contexts, as each reflects a different understanding of professional relationships and carries distinct methodological and ethical implications. While **partnership** is grounded in collaboration, reciprocity, and shared responsibility, **accompaniment** emphasises presence, emotional attunement, and the willingness to remain alongside another person throughout their lived experience. Although both concepts challenge hierarchical models of practice, they do so through different relational orientations.

Within art therapy, partnership supports the development of horizontal and collaborative professional relationships in which therapist and participant engage as active contributors to the therapeutic process. Such an approach aligns with participatory and person-centred models of practice and can contribute to addressing structural inequalities, critically examining symbolic power, and facilitating the transformation of *habitus*. From this perspective, Bourdieu's (1986) theory of capital provides a valuable analytical framework for understanding professional relationships in art therapy. Cultural capital encompasses the therapist's knowledge, competencies, and professional expertise; symbolic capital derives from social recognition and professional credibility; while institutional capital is constituted through formal qualifications, certification, and professional affiliation. These forms of capital inevitably shape the therapeutic encounter by influencing authority, legitimacy, and the distribution of power within the relationship.

At the same time, relationality in art therapy cannot be considered independently of the broader processes of professionalisation that have transformed the field over recent decades. Professional standards, ethical codes, accreditation systems, and institutional expectations increasingly define the conditions under which therapeutic relationships are established and sustained. Consequently, both partnership and accompaniment should be understood not merely as interpersonal attitudes but as relational frameworks embedded within professional practice, each carrying distinct epistemological assumptions, ethical commitments, and methodological implications for art therapy.

The Professionalisation of Art Therapy and Professional Responsibility

Art therapy continues to evolve within a productive tension between its humanistic mission and the demands of professionalisation. On the one hand, the field is grounded in values of creativity, relationality, and person-centred practice; on the other, it is increasingly expected to operate within standardised frameworks of professional accountability and evidence-based practice. This dual orientation reflects the broader development of helping professions, in which ethical commitment must be accompanied by demonstrable professional competence and institutional legitimacy.

The professionalisation of art therapy corresponds to the classical sociological analyses of professions advanced by Abbott (1988) and Freidson (2001), who argue that occupations attain professional status through the establishment of specialised knowledge, educational systems, professional autonomy, mechanisms for regulating competence, and institutional recognition. Within this perspective, professionalisation is not simply a process of formalisation but also an effort to preserve the foundational values and social mission of the profession while meeting the standards expected of contemporary professional practice.

The standardisation of art therapy education, the development of ethical codes, and the strengthening of the field's research base are therefore integral to professional responsibility. These developments enhance public trust, support accountability, and provide a foundation for evidence-informed practice without diminishing the relational and creative dimensions that define art therapy.

More broadly, the ongoing effort to clarify the disciplinary and professional status of art therapy reflects the maturation of the field as it negotiates its conceptual boundaries, professional language, and forms of epistemic legitimacy. This process can be understood through Kuhn's (1962) analysis of paradigm formation and Bourdieu's (2004) theory of scientific fields, both of which emphasise that emerging disciplines establish legitimacy through the development of distinctive conceptual frameworks and recognised professional practices. At the same time, Fleck's (1979) concepts of the *thought collective* and *thought style* illuminate how art therapy has developed a shared community of researchers and practitioners who construct common ways of understanding, investigating, and communicating about therapeutic processes. These processes of professionalisation shape not only the institutional status of art therapy but also the formation of art therapists' professional identity, influencing how practitioners understand their expertise, ethical responsibilities, and relational role within therapeutic practice.

The Professional Identity of the Art Therapist: Between Mission and Professionalisation

The sociology of professions demonstrates that disciplines emerging from grassroots or community-based practice undergo a series of interrelated transformations as they become incorporated into formal systems such as healthcare, education, and social services. Three processes are particularly salient: institutionalisation, reflected in the development of professional organisations, standards, and ethical codes; scientific legitimation, achieved through the accumulation of empirical research, scholarly publications and evidence syntheses; and identity negotiation, through which practitioners define the distinctive knowledge, values, and scope of their profession in relation to adjacent disciplines (Abbott, 1988; Freidson, 2001).

These dynamics are clearly evident within contemporary art therapy. Differences observed across the profession concern not only methods of practice but also divergent understandings of the vocation and professional role of the art therapist. Professional identity may therefore be conceptualised as existing along a continuum between **mission** and **profession**, between value-driven commitment and role-based expertise. At one end lies a humanistic orientation grounded in the transformative potential of art, the centrality of the therapeutic relationship, respect for the participant's agency, and an emphasis on process rather than artistic product. At the other lies an increasingly professionalised identity characterised by defined competencies, ethical accountability, evidence-informed practice, and institutional responsibility. These positions should not be understood as mutually exclusive but rather as complementary dimensions of contemporary professional identity.

The diversity of approaches within art therapy reflects not only differences in theoretical orientation but also the characteristics of a developing interdisciplinary profession. Professional identity is shaped by educational background, institutional setting, and the paradigms within which practitioners are trained and employed. Consequently, the field encompasses a broad spectrum of practice, ranging from clinically oriented models integrated with psychotherapy, psychiatry, and neuropsychology to socially and culturally informed approaches, including community art therapy, work with marginalised populations, and interventions addressing collective trauma. Such diversity arises not solely from competing conceptualisations of art therapy but also from variations in organisational contexts, regulatory frameworks, and professional expectations.

Research on motivation in the helping professions (Alarcon et al., 2009; Ogińska-Bulik, 2006; Potocka, 2011; Wolska-Prylińska, 2018) indicates that practitioners who experience their work as a calling often report a stronger sense of purpose and greater resilience when facing occupational challenges. At the same time, this orientation may increase vulnerability to emotional exhaustion and professional burnout, particularly when commitment becomes closely intertwined with personal identity. Excessive identification with a professional mission can blur personal and professional boundaries, fostering chronic overinvolvement and self-sacrifice. For this reason, contemporary conceptions of professionalism emphasise not only dedication and ethical commitment but also reflective practice, appropriate professional boundaries, and sustainable self-care. Within art therapy, professional responsibility therefore entails balancing humanistic values with evidence-informed practice, ensuring that commitment to others is accompanied by accountability, reflexivity, and the capacity to sustain one's own professional well-being.

Models of Accompaniment in Art Therapy Practice

Every professional community engages in ongoing reflection on the values that define its identity and guide its practice. In art therapy, these shared values include empathy, respect for personhood and agency, relationality, and a commitment to process-oriented practice. Art therapists commonly invoke the transformative potential of art, emphasising healing, integration, personal growth, and psychosocial change. Yet these shared commitments are enacted through markedly different models of

professional practice. From the perspective of professional education and the standardisation of art therapy training, it is therefore possible to distinguish several ideal-typical models of accompaniment, understood as analytical constructs rather than fixed categories of practitioner.

The first may be described as the **vocation-oriented practitioner**, or what might metaphorically be termed the vocation-driven practitioner. Within this model, art is understood as more than a therapeutic medium; it is attributed an almost intrinsic healing power and, at times, a deeply symbolic and existential significance. Authenticity, personal experience, and emotional commitment are regarded as central foundations of therapeutic engagement. Although this orientation may be appealing because of its strong ethical commitment and sense of purpose, it also raises important questions concerning professional accountability, the assessment of competence, and the limits of therapeutic responsibility. In highly bureaucratised systems of health or social care, such a stance may represent an attempt to reclaim professional autonomy and preserve the humanistic foundations of therapeutic work. However, an exclusively romanticised understanding of art therapy may also create tensions. It may discourage critical evaluation of practice, reduce the perceived need for empirical evidence, and foster forms of practice that remain outside established systems of professional regulation and quality assurance. At a time when the art therapy profession is actively pursuing greater professional recognition through research, ethical standards, and standardised education, a position that rejects institutional frameworks altogether may create tensions with contemporary expectations of professional accountability.

A second model is that of the **procedurally oriented practitioner**, who primarily identifies as a healthcare or educational professional operating within institutional frameworks. Here, professional discourse is dominated by concepts such as evaluation, documentation, measurable outcomes, and effectiveness. While this orientation strengthens accountability and provides important safeguards for both clients and practitioners through ethical regulations, professional standards, and institutional oversight, it also carries the risk of reducing therapeutic work to a sequence of procedures. When creativity becomes subordinated to administrative requirements and measurable outcomes, art therapy risks losing the openness, ambiguity, and symbolic richness that constitute its distinctive contribution.

Consequently, professionalisation should not culminate in the bureaucratisation of practice, nor should the art therapist become merely the implementer of institutional programmes or externally funded projects. Rather, professional competence should remain inseparable from accompaniment understood as sustained relational presence within the therapeutic process.

A third model may be characterised as the **reflective-integrative practitioner**. Although perhaps the most demanding, this model offers the greatest potential for integrating the humanistic and professional dimensions of art therapy. Practitioners adopting this orientation acknowledge the importance of scientific research, professional standards, and evidence-informed practice while maintaining critical reflection on the ethical purpose and existential meaning of their work. They neither reduce art therapy to a medically oriented intervention nor position mission and professionalism as opposing ideals. Instead, they view these dimensions as mutually reinforcing. This orientation provides neither the certainty associated with a vocational ideal nor the security offered by procedural expertise. Rather, it requires continuous self-reflection, clinical supervision, ethical deliberation, and a willingness to critically examine one's own assumptions and professional practice. From this perspective, calling and profession are not contradictory but complementary dimensions of responsible professional identity (Wrzesniewski et al., 1997).

Whether practitioners identify more closely with the vocation-oriented practitioner model, emphasising the healing power of art; with the institutional professional, integrating art therapy within evidence-based frameworks; or with the reflective practitioner seeking to reconcile vocation and professionalisation, the defining feature of art therapy should remain an ethical commitment to professional responsibility. Emotional engagement and sensitivity to others, while essential qualities, cannot by themselves constitute sufficient qualifications for professional practice. Equally, therapeutic work through art cannot be fully captured through quantitative indicators or narrowly defined measures of

effectiveness. The relationship between creative freedom and therapeutic responsibility should therefore be understood not as a dichotomy but as a productive tension that supports the ongoing professionalisation of the field.

The central question is thus not whether art therapy should be understood primarily as a mission or as a profession. Rather, it concerns the willingness of practitioners to assume the responsibilities inherent in both perspectives. This challenge extends beyond theoretical debate and directly informs the design and implementation of art therapy interventions. Practice motivated solely by a sense of vocation, if unsupported by robust professional competence and ethical accountability, may expose participants to unintended harm. Conversely, reducing art therapy to an economically driven or procedurally regulated service risks instrumentalising creative practice and undermining its humanistic foundations. The tensions between mission, professionalisation, and professional responsibility are therefore not peripheral to art therapy but constitute one of the defining characteristics of contemporary practice.

Autoethnography: Designing Art Therapy Opportunities¹

The tensions described above are not only theoretical but also emerge directly within everyday art therapy practice. The following autoethnographic reflection illustrates how accompaniment is operationalised through the design of therapeutic encounters.

Where, then, can a balance be found between creative freedom and therapeutic responsibility? How can practitioners create conditions for authentic creative experience without imposing predetermined outcomes? Rogers (2018, p. 67) offers a compelling point of departure when he argues that "the therapeutic relationship is only a special instance of interpersonal relationships." His understanding of authenticity and transparency—remaining in contact with one's genuine feelings while approaching the client with warmth, unconditional respect, and empathic sensitivity to both the client's world and one's own (Rogers, 2018, p. 65)—has profoundly informed my own practice. Drawing on these principles, I have developed a conceptual and practice-based framework of original art therapy opportunities, a term inspired by Ryszard M. Łukaszewicz's (1994) concept of *educational opportunities*. Rather than prescribing a sequence of interventions, these opportunities are intentionally designed as open relational spaces in which creative and therapeutic processes may emerge.

Designing such opportunities requires relinquishing the illusion of professional omnipotence and accepting a form of therapeutic engagement that cannot be fully predicted or controlled. Within this perspective, accompaniment assumes particular methodological significance. Workshops are not conceived as mechanisms for achieving predefined outcomes or for implementing standardised programmes; instead, they are understood as encounters that require responsiveness to the uniqueness of each participant and each situation. Depending on emerging needs, this may involve encouraging activity and exploration, creating opportunities for emotional expression, offering moments of quiet reflection, or simply listening attentively (Bogus, 2016, pp. 21–27).

Participants do not experience creative activities in uniform ways. Their engagement is shaped by emotional states, personal histories, momentary well-being, and individual meanings attributed to the artistic process. Consequently, apparent passivity should not automatically be interpreted as resistance or as an indication that intervention is required. A guiding principle throughout my professional practice has been the observation that "a child does not always have to do what they want, but should always want what they do" (Gloton & Clero, 1985, p. 97). Although originally formulated within childhood education, this principle is equally applicable to adult clients, emphasising intrinsic engagement rather than external compliance.

Art therapy opportunities therefore encompass a wide spectrum of experiences. They may be active or contemplative, oriented toward aesthetic experience, playfulness, emotional exploration, or

¹ In this article, I use the term **art therapy opportunities** to refer to intentionally designed relational and creative situations that invite, rather than prescribe, therapeutic engagement.

quiet reflection. At times, they may appear entirely ordinary, yet they remain distinct from everyday routines because they create conditions for experiencing oneself and others differently. In this sense, an art therapy opportunity functions as a framework for intentional change, while the workshop itself offers possibilities rather than obligations (Olinkiewicz, 2004, pp. 11–12). Within these spaces, there is rarely a single correct solution; what matters most is authentic participation in the creative process.

Designing these encounters also represents a conscious choice regarding my own professional role. Rather than adhering rigidly to predetermined methods, I understand art therapy as a reflective practice that integrates personal experience, careful observation of relational dynamics, and continuous adaptation to the participant's evolving needs. Not every encounter leads to what might conventionally be described as success. The quality of the interaction depends upon the participants' willingness to engage, their emotional readiness, and the relational climate that develops between us. Yet if accompaniment is understood as creating equal opportunities for participation rather than guaranteeing identical outcomes, it becomes possible to cultivate what Buber (1992, p. 56) described as the *between*—the relational space in which persons come into being through encounter. Within this perspective, accompaniment extends beyond specific therapeutic techniques to encompass the quality of the therapist's presence itself.

Another concept that informs both my academic and clinical work is art therapeutic radiance, inspired by Stanisław Dobrowolski's notion of the concept of therapeutic radiance (1948, pp. 116–117). I use this concept to describe the indirect relational influence exerted by the therapist through presence, authenticity, and empathic engagement rather than through explicit instruction. What matters is not merely what the therapist says, but their willingness to be genuinely present and to enter into a meaningful relationship. Equally significant is attentiveness to what remains unspoken in participants' experiences. Silence, hesitation, gesture, rhythm, and symbolic expression often reveal dimensions of experience that remain inaccessible through spoken language alone.

Where words are insufficient, art therapy offers multiple alternative pathways for communication and meaning-making (Gilroy, 2009). Visual art may become the preferred medium; where visual expression proves inadequate, music, movement, dance, film, storytelling, drama, theatre, and other expressive modalities can provide equally valuable opportunities for exploration (Malchiodi, 2012; Szulc, 2011). The therapist's role is not to determine which medium should be used but to accompany participants in discovering the forms of expression that resonate most authentically with their own experience. Accompaniment therefore entails creating an atmosphere of shared presence, respecting the participant's right to decline particular activities, while simultaneously maintaining therapeutic attentiveness and professional responsibility.

Rogers (1991, p. 6) argued that relationships with others provide the most powerful context in which individuals develop greater self-understanding and transform patterns of being and behaving. For this reason, therapeutic responsibility concerns all participants in the process, while carrying particular ethical weight for the practitioner. Picht (1981, pp. 256–257) similarly maintained that responsibility can only be assumed by those who recognise the inseparable relationship between theory and practice, understanding professional action as an expression of reason enacted through engagement with lived reality. This perspective is especially relevant to educational, creative, and therapeutic work, where accompaniment unfolds within the complexity of human relationships. From this standpoint, art therapy is more than a collection of techniques or interventions; it is fundamentally a practice of responsible presence, relational engagement, and shared participation in processes of human becoming.

Conclusion

The analysis presented in this article suggests that accompaniment constitutes a foundational relational paradigm for contemporary art therapy. As an ethically grounded and methodologically informed mode of professional practice, it may support emotional regulation, foster deeper engagement in the creative process, and contribute to participants' experiences of psychological safety, trust, and

therapeutic satisfaction. These outcomes depend not only on technical competence but also on the therapist's capacity for empathy, attentive presence, and reflective practice. Consequently, relational competencies should constitute an essential component of art therapist education, professional certification, and continuing professional development, strengthening both the quality of therapeutic relationships and the professional standards of the discipline.

Within art therapy, accompaniment involves creating conditions in which participants can engage creatively without externally imposed expectations, explore personal meanings without externally imposed interpretations, and exercise agency throughout the therapeutic process. Rather than directing or explaining symbolic expression, the therapist helps sustain a relational space in which participants are free to discover their own meanings and narratives. Accompaniment therefore reconciles respect for participants' autonomy with the therapist's ethical and professional responsibility. At the same time, it represents a conceptual construct that invites further operationalisation and empirical investigation through empirical research, particularly in relation to therapeutic alliance, emotional regulation, and creative engagement.

Because creative processes are inherently open-ended and unpredictable, accompaniment requires the therapist to tolerate ambiguity while maintaining a secure therapeutic framework. The therapist does not assume the role of an authoritative interpreter but instead bears witness to the unfolding process, supporting participants as they explore and construct personally meaningful understandings of their experiences (Fish, 2008, pp. 70–77).

Viewed through the philosophical lens of Lévinas (1998, pp. 80–82), accompaniment in art therapy represents an irreducible interpersonal encounter grounded in ethical responsibility for the Other. It is characterised by conscious and reflective professional presence, participation in another person's process of becoming, and the integration of empathy with professional accountability while consistently respecting the participant's autonomy. In this sense, accompaniment extends beyond a therapeutic technique to become an ethical orientation that shapes professional identity and practice.

Ultimately, understanding art therapy through the lens of accompaniment shifts attention away from artistic products or predefined therapeutic outcomes toward the quality of the relational encounter itself.

This perspective reinforces the humanistic foundations of the profession while remaining compatible with contemporary expectations regarding professional competence, ethical accountability, and evidence-informed practice. Art therapy is therefore concerned not merely with the production of artistic outcomes, but with accompanying persons in processes of meaning-making, growth, and human flourishing.

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