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Drawing as Self-Expression with Normally Functioning Adults: A 10-week Technique

A DISSERTATION

submitted by

Deborah L. John

In partial fulfillment of the requirements
for the degree of
Doctor of Expressive Therapies

LESLEY UNIVERSITY
February 2012



Lesley University
Ph.D. In Expressive Therapies Program

DISSERTATION APPROVAL FORM

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ABSTRACT

In this research study, a sample of normally functioning adults ($N = 30$) each made a series of small drawings, one each week for 10 weeks. Participants completed two questionnaires about their experiences of making the series. The pre-intervention questionnaire collected demographic information and asked participants to rate their perceived ability to use drawing for self-expression on a Likert scale. The post-intervention questionnaire again asked participants to rate their perceived ability to use drawing for self-expression. Results indicated a significant change from pre to post intervention ($p = 0.012$) in perceived expressive drawing ability. The post intervention questionnaire also collected data about the specific techniques employed. Participants indicated that fun/enjoyment and calming were the most important advantages. The most cited helpful suggestion was that drawing can be used for self-expression. The small size of the drawing cards was rated as the most popular element. Qualitative data supported the idiosyncratic ways that participants used drawing for self-expression. Overall findings provided evidence of the ways that normally functioning adults can be supported to experience and value self-expressive drawing. Within the context of positive psychology this study contributes to research findings about the well being and optimal functioning of participants.

CHAPTER ONE

Introduction

Drawing and drawing directives are used extensively in art therapy with a wide range of populations. The majority of art therapy research literature is directed toward individuals who suffer from debilitating mental or physical illness. This research literature addressed the use of drawing with these clinical populations, but neglected to argue if the benefits available to clinical populations could also apply to more normally functioning populations. This fact raises a question regarding the potential use of drawing activity with normally functioning individuals as a useful means of expression.

Drawing tools can be inexpensive and portable so drawing as a means of self-expression is an accessible way to process and integrate creative non-linear thinking with more linear rational thinking. Normally functioning adults may benefit from an accessible means to more fully express themselves. The research in this study was designed with a specific structure to encourage research participants to experience a regular drawing practice and to document their responses to this experience.

Objectives of This Study

The purpose of the study was to encourage the normally functioning adult participants to include nonlinear creative thinking into their life style by means of a specific drawing task. The Merriam-Webster dictionary (1997) defines normal as, “sound in mind and body” (p. 505). Normally functioning in the context of this study was therefore defined as above. *World Book Dictionary* (1988) quotes Freud, “The borderline between the... abnormal and normal states is indistinct” (p. 1418). It was beyond the scope of this study to define normality outside the context of not showing a mental

disorder, and functionality was defined as participants having the ability to financially support themselves within contemporary society. Specifically, the convenience sample of normally functioning study participants each made a series of small drawings and documented their experiences. Data were gathered to analyze the impact of the study and the advantages and disadvantages of the specific techniques employed.

Importance of Topic

The Oprah Magazine, though not a peer reviewed research journal, is a reflection of American popular culture. In Orenstein's (2011) article in that magazine, *The Creation Myth*, she promoted ways for individuals to express themselves creatively. The author stated her opinion that, "Somewhere along the way many of us came to believe that we're no good at drawing...and our imaginations just aren't very imaginative. After all not everyone is the creative type right? Wrong" (p. 148). The article goes on to debunk the myth that only some individuals are creative, and suggests methods to unblock creative expression. Similarly Cameron (1992), in her book, *The Artist's Way, A Course in Discovering and Recovering Your Creative Self*, lists basic principles of creativity, including "Creativity is the natural order of life. Life is energy: pure creative energy" (p. 3). Cameron's text is organized as a twelve-week course for creative recovery (p. 4). In these ways Orenstein and Cameron have both responded to the need for creative expression within contemporary American culture, and both have suggested art making.

In 1893 Frederick Jackson Turner wrote, *The Significance of the Frontier in American History*. In this paper that was read at the 1893 World's Fair in Chicago, he explained American culture as a result of its beginning as a frontier settlement. He described this influence as follows, "That coarseness and strength combined with

acuteness and inquisitiveness; that practical inventive turn of mind, quick to find expedients; that masterful grasp of material things, lacking in the artistic, but powerful to effect great ends...” (p. 37). This statement reflects Turner’s opinion of American culture as valuing practical rational problem solving more than artistic creation as expression. This makes sense in a culture that began in the wilderness, where practical concerns of necessity were primary for survival.

Peter Levine (2010) addressed the cultural need for healing through nonverbal methods in his text, *In an Unspoken Voice*. He stated, “Despite our apparent reliance on elaborate speech, many of our most important exchanges occur through the ‘unspoken voice’ ... the deciphering of this nonverbal realm is a foundation of the healing approach...” (p. 11). He continued by advocating for fuller expression, “... when animal instinct and reason are brought together, ...[they give] us the opportunity to become more whole human beings” (p. 11). Levine emphasized the necessary human ability of being able to process at an instinctual level, “This capacity holds the key for our modern survival...” (p. 15).

Lorin Hager (2011), a colleague of Peter Levine, spoke about the difficulty of instinctual processing common in western culture. He explained that the natural process of completing a discharge cycle after even small traumatic experiences is a problem in our culture because of the interference of rational linear thoughts and a separation from bodily awareness. He defined the discharge cycle as beginning with tension as a response to an environmental challenge, then a release of tension that is followed by relaxation, and a reset of the nervous system. Western social protocol and upbringing can inhibit instinctual processing. Levine (2011) echoed this sentiment, “Many of us humans,

unfortunately, have become alienated from this capacity for resilience and self healing. This...has made us vulnerable to being overwhelmed and traumatized,” (p. 27). He further explained, “Restoring the balance and rhythm between instinct and reason also plays a central part in healing the mind/body split. Integration of brain and body, of right and left cerebral hemispheres, and of primitive and evolved brain regions promotes wholeness and makes us fully human” (p. 72). In a personal communication with Hager on August 28, 2011 he agreed that drawing/doodling could be a means of emotional processing that could help individuals discharge daily environmental stressors and promote clearer actions and decisions. Levine explained that self regulation after a stressful incident includes physical releases that are sometimes incomplete and “are frequently liberated through micro-movements” (p. 93). In this way, hand movements and posture adjustments especially in the process of undirected drawing and doodling could allow for needed instinctual release.

Hager (2011) emphasized the need to include three aspects of ourselves in decision-making; survival instincts, emotions which include morality, and data or ideas. With these three components, individuals can make holistic decisions, that take into account both individual and larger societal needs. In this way contemporary American culture can benefit from decisions and actions that include nonlinear integrative creative thinking. This expanded mode of thinking could enable more satisfying solutions to both every day problems as well as important decisions.

Since the current study is designed as a way for the normally functioning participants to include drawing as a means of creative thinking into their lifestyle, the concepts of positive psychology are relevant here. Duckworth, Steen, & Seligman (2005)

explain that positive psychology is, “A field concerned with well being and optimal functioning” (p. 630). Compton (2005) cites King who emphasizes that positive psychology has a focus on “‘the average person’ with an interest in finding out what works, what’s right, and what’s improving” (p. 3). This study looked at a drawing technique through the lens of what was helpful for the self-expression of the participants. Anspaugh, Hamrick, & Rosato’s (2011) recent text identifies wellness as “a balance of the physical, emotional, intellectual, social, spiritual, occupational, and environmental aspects of life” (p. viii). The drawing technique employed sought to promote balance in the lives of study participants.

CHAPTER TWO

Literature Review

This literature review addresses the clinical and non-clinical uses and benefits of drawing in art therapy including techniques for both adults and children. Techniques and studies that emphasized the value of drawing as an integrative means of processing emotions were a focus of this review. Based on this information, there is support for the beneficial use of drawing with normally functioning adults who, because of contemporary western cultural training have been inhibited in emotional expression and integration.

Art therapy Research on the Use of Drawings Adult's Drawings

The clinical value of projective drawing assessments.

Hammer (1980) explained that there is abundant information available to clinicians who use projective drawing with their clients.

The drawing page serves as a canvas upon which a subject may sketch a glimpse of his inner world, his traits and attitudes, his behavioral characteristics, his personality strengths and weaknesses, including the degree to which he can mobilize his inner resources to handle psychodynamic conflicts, both interpersonal and intrapsychic. (p. 6)

Because this information is available in drawings, many clinicians and art therapy researchers have developed and used drawing assessments to understand the personalities and problems of clients. Drawing assessment results seemingly, based on Hammer's description (1980) can also help suffering or normally functioning individuals to understand themselves, and the ways that their drawings reflect personality traits and

problem areas. With this understanding, self-reflection about the meaning and helpfulness of the drawing process can also be enhanced.

Drawing assessments were first designed to evaluate cognitive and intellectual abilities in children (Draw-A-Man Test, Goodenough, 1926). In 1948 Machover developed the Draw A Person (DAP) test that expanded drawing assessment into a projective tool. The DAP was designed to evaluate how the drawing of a person reflects the personality and problems of the drawer. In 1992, Naglieri and colleagues expanded the DAP to include a scoring system to screen for emotional disturbance (DAP: SPED). Information in this paragraph is from Delfi/Figure-drawings retrieved on July 2, 2010 from <http://www.minddisorders.com/>.

Assessment series were created to delve further into the projective information available in drawings. Most relevant to the current discussion are four assessments series. These are: the House Tree Person test (Buck 1948); the Ulman Personality Assessment Procedure (Ulman, 1976); the Diagnostic Drawing Series (Cohen, 1983); and the Projective Tree Drawing Before, During and After a Storm (Miller, 1987). Though these assessments are described as helpful for clinicians to understand clients, they can be equally valuable for assessment participants to understand themselves. In her text, *Art is a Way of Knowing*, Allen (1995) stated, "Making images is a way of breaking boundaries, loosening out-worn ideas, and making way for the new. It is a form of practice through which...knowledge of ourselves can ripen into wisdom" (p. x). Though Allen was not writing specifically about drawing assessments she was advocating for image making as a means of insight through the process of self-reflection.

The House Tree Person (HTP) test is a series of six drawings that include a

chromatic and an achromatic drawing of each subject: a person, a house, and a tree. This assessment was “designed to provide information on personality characteristics and interpersonal relationships” (Brooke, 2004, p. 68). The author’s research did not focus on establishing validity or reliability of the HTP (Brooke). Hammer (1987) gives examples of the HTP with psychiatric patients. He emphasizes the difference between the chromatic and achromatic drawings explaining that the chromatic drawing is representative of the client’s emotional state, whereas the achromatic drawings are more related to the patient’s defensive or rational functioning. In the text he pointed out details in the achromatic drawings that give clues to the underlying emotional state of the client. Hammer’s research with 60 cases found an 80% agreement between his interpretation of the HTP and a psychotherapist’s diagnostic categories.

In the movie, *Art Therapy: Beginnings* (1976), Elinor Ulman demonstrated and described the Ulman personality assessment. This is a series of three drawings: a free drawing, a scribble drawing, and a choice of scribble or free drawing. Though this series is not in contemporary literature, it is purported to give information about how the client responds to the thought loosening process of the scribble drawing, which is an important concept in any art therapy intervention. In this way according to Ulman it can inform the clinician about the client’s personality characteristics and abilities, and can also contribute to an individual’s self understanding.

In the Diagnostic Drawing Series clients are asked to make three drawings: a free drawing, a tree and, an abstract picture of how he or she is feeling. This assessment, “...furnishes information about the client’s strengths, defenses, and issues” (Brooke, 2004, p. 57). Research by the author on a non-random group of psychiatric patients,

showed significant differences in four diagnostic categories.

Michael J. Miller (1987) described, *A Crisis Assessment: The Projective Tree Drawing Before, During and After a Storm*. This assessment gives information about the effects of trauma on the patient; the trees are a symbolic representation of the patients state before, during and after a crisis. This assessment was designed in a psychiatric hospital and presented in the text in a case format. Miller believed that “Not only are our patients in crisis. So, too, is society. The social fabric is shaky; the moral structure precarious. Symptoms are widespread” (p. 188). In this way Miller implied that normally functioning individuals can benefit from drawing assessments also.

According to Metzl, (2008) there has been an increase in the use of the person picking an apple from a tree and formal elements of art therapy scale (PPAT; Gantt 1990, FEATS; Gantt & Tabone 1998) assessment in the research she reviewed within the *Arts in Psychotherapy* from 1999-2004. Due to the contemporary popularity and versatility of this assessment, it is included in this review. The PPAT is a response to the fact that projective drawing tests yield information that is so complicated and idiosyncratic that the data are difficult to make generalizations about. The PPAT is evaluated instead through the categorization of 14 elements. These categories are named the Formal Elements Art Therapy Scale (FEATS; Gantt & Tabone 1990) that identifies aspects within the drawing and does not look at the content. The 14 elements are: color prominence, color fit, implied energy, space, integration, logic, realism, problem solving, developmental level, details, line quality, person, rotation, and perseveration (Brooke, 2004). This allows for a more objective view of the drawing and some elements can be used with any drawing and not just the PPAT assessment for which it was originally

designed. This makes the FEATS a very flexible tool for looking at and comparing drawings. Gantt and Tabone have seen trends of characteristics in drawings done by their normal/ non-patient participants. Generally they state that, “*As a group*, these drawings have an average amount of energy, color and details (that is neither too much or too little of these details)...[and] integrated composition that suggests a three-dimensional space” (p. 55). The authors go on to cite Urban who considered “central placement, relative symmetry, pleasing to look at, consistent line quality with rather steady pressure, normal proportions with some suggestion of movement or animation” to be characteristics of normal figure drawings (p. 55). They also referred to Groth-Marnat as emphasizing that in the Kinetic House-Tree-Person drawing, it is normal to integrate elements without elements being “overly emeshed and colliding into one another” (pp. 55-56).

When referring to the element of perseveration, Gantt and Tabone (1998) suggested that according to authors Maclay, Guttman and Mayer-Gross (1938), and Pickford (1967) doodling by normal individuals may include perseveration (p. 43). Art therapist and researcher Morrongiello (1996) is cited as saying that perseveration can be seen as a normal behavior in all age groups, and has also been seen in “conditions affecting the frontal lobe [including] disorders such as Alzheimer’s and other dementias, autism, learning disabilities, attention deficit hyperactivity disorder (ADHD), and pervasive developmental disorder” (p. 42). Calstairs was quoted as seeing a similarity between normal doodling and the drawings of people with schizophrenia that “... often shows a seemingly involuntary perseveration in the repetition of small details or in an elaboration of symmetrical patterning such as normal people show in doodling...” (p. 42).

FEATS developers and researchers Gantt and Tabone (1998) sought to correlate the specific elements in drawings to symptoms in the Diagnostic and Statistical Manual of Mental Disorders in order to be able to distinguish between the disorders of major depression, schizophrenia, mania, and organic impairment. They also researched the difference between drawings done by patients and non-patients in order to be able to assess the differences between “pathological ‘signs’” and “the lack of artistic training and skill.” They have stated, “... no recent systematic collection has been made of the art of adult non-patients.” Their results are inconclusive, due to the “lack of access to a more representative sample of both patients and control group members” though the study data collected from the one facility studied includes drawings from over 5000 individuals (p. 15). The authors stated, “The most pressing step is to conduct a large-scale validity study ourselves and to encourage others to replicate our work” (p. 60).

Bucciarelli (2011) sought to further the research on the drawings of a non-clinical population. The 100 subjects (students 18-24 years old) in her study were instructed to draw a person picking an apple from a tree. These drawings were rated on all 14 elements of the FEATS. Results include mean scores for each element. The article stated, “The data suggested normative trends with respect to (a) appropriate color use, (b) logical and balanced composition, (c) several added details beyond the basic drawing problem, (d) realistic depiction of a person, and (e) depiction of a practical strategy for getting an apple out of the tree” (p. 33). However, developmental drawing levels of study participants, “[were] on average, a lower than adolescent drawing level” (p. 34).

Creative expression and brain function.

Hammer (1980) emphasized that the content of drawings includes both conscious

and unconscious material (p. 6). Malchiodi (2003) also wrote that according to Rubin, “spontaneous art expression provides access to the unconscious” (p. 46). Therefore some understanding of the connection between brain function and its relationship to conscious and unconscious aspects of creative expression is relevant here. Edwards (1979) who authored *Drawing on the Right Side of the Brain*, wrote that the two hemispheres of the human brain process information differently. Typically the left side processes in a verbal and analytical manner, while the right hemisphere processes information in a nonverbal and intuitive mode. Though both ways of thinking and perceiving are important aspects of being fully human, Western culture including its educational system generally rewards and supports logical, linear thinking more than nonlinear creative thought. Therefore according to Edwards right-hemisphere processes are often uneducated and unrewarded (pp. 26-40). Contemporary art therapists and neurobiological researchers have used and expanded these concepts. Strang and Van Meter (2007) advocate for “understanding brain functioning and methods of enhancing information processing strategies for the purpose of achieving treatment goals including both cognitive and artistic skills” (p. 103). Malchiodi (2003) concurred, “Using neuroscience as a point of reference explains many of the approaches to art therapy...” (p. 22). Other researchers who have used art directives with information processing in mind include: Gantt and Tinnin (2007), Hudson (2007), Kaiser, Tripp and Talwar (2007), Kloer (2005), Lusebrink (2004), McNamee (2003, 2004), Perrier (2007), Pugh (2007), and Talwar (2007). Lusebrink’s examination of the relationship between brain function and how it applies to art expression yielded four areas of interest. These included: interactions between cognitive awareness and the unconscious; visual and motor information and how memories can be accessed and

processed through various art media; how different aspects of information can be emphasized through media and directive selection; and how basic sensory building blocks can be processed through art making (p. 133). Belkofer and Lukasz (2008) measured neurological activity of a subject before and after art making using electroencephalograph (EEG) data. Because their study showed a significant difference in neurological activity pre and post art making, they speculated that in the future, "... one may be able to define art therapy treatment based on ...histories, as well as...baseline EEG patterns, and to use art therapy to modify or normalize the brain activity leading to improvement in their condition" (p. 62). Researchers Talwar, McNamee, Gantt, and Tinnin's techniques were included in the section, *Art Therapy Techniques for the Integration of Linear and Non-Linear Thinking*. Briefly described, Gantt and Tinnin used a sequential visual narrative to enable clients to organize and process traumatic events. Both McNamee and Talwar's techniques focus on the transformation of negative thought processes through visual expression. Researcher Hudson's technique included making a mobile and observing its movement as a means of integrating traumatic experiences. This technique is included in the section, Contemporary Theories that are included in Art therapy Techniques.

Art therapy techniques for non-linear expression.

Scribble drawing is an art therapy technique in which a participant works loosely to draw a large scribble on a page. The client then looks for images within the scribble and makes them graphically evident. The process is similar to finding pictures in cloud formations. Hall and Lindzey (1985) described this type of non-linear thinking as primary process thinking, which is "a complicated psychological procedure [that] forms an image

of something that can reduce or remove tension” (p. 33). According to Hall and Lindzey primary process thinking is characterized by the loosely associated images in dreams (p. 54). These researchers stated that hospitalized patients with psychosis often make pictures that reflect this mode of thinking.

According to Arnheim (1992), the vibrant creativity evident in these art works was first made famous by Prinzhorn. Prinzhorn was a German psychiatrist who collected art from institutionalized psychiatric patients. Both his book, *Artistry of the Mentally Ill*, published in 1968, and exhibitions of the patient artwork, influenced the public, artists, and mental health professionals to see creativity in new ways. (pp. 144-154). As described by Hall and Lindzey, primary process thinking is characterized by dream-like images, therefore paintings done by surrealist artists show this mode of thinking. In *Dali The Reality of Dreams*, Schiebler (n.d.) writes detailed accounts of the dream-like images in paintings by the surrealist Salvador Dali. McNiff (1992) emphasized the relationship between surrealism and art therapy, “Surrealism, like art therapy is a philosophy and method of fully engaging art with life and psyche” (p. 44).

McNamee (2004) has written about using scribble drawing so that clients can access less conscious right-brain associations. Metaphors from scribble drawings are combined with talk therapy so that clients can understand and work through issues. She credited Cane (1951), and Winnicott (1971) as developers of the scribble drawing, and Ulman (1965) as using the scribble in an assessment tool. McNamee (2004) believed that “shapes and images identified by clients [within a scribble] represent an expression of their lived experience” (p. 138). Rubin (1984) described scribble drawing as a technique “to get more rapidly in touch with less conscious kinds of imagery” (p. 16).

Allen (1995) described her own use of scribble drawing to find images that relate to deeper aspects of herself (pp. 88-95).

An early version of drawing techniques that promoted nonlinear thinking was published by Edwards (1979). Edwards explained that the right hand is connected to the left hemisphere of the brain, and the left hand is connected to the right hemisphere of the brain. This has been confirmed with research on people who have had brain injuries including strokes. Edwards included drawing with ones non-dominant hand as a technique to access nonlinear thinking, although she also explained that switching hands does not necessarily change ones mode of thinking. Liebmann (2004) included painting with the opposite hand as a means of “loosening up” (p. 200) in her text of directives for art therapy groups.

Drawing within a circle seems an obvious method for promoting nonlinear thinking. Strauss (1987, p. 24) explained that drawing within a circle has ancient roots, which reflect right-brain ideals of harmony and wholeness. According to Strauss, developmentally a child is able to make a circle at about three years old. Strauss stressed this is interpreted as an early expression of ego consciousness. The concept of inside and outside has been established. According to Henderson, Rosen and Mascaro (2007), referring to another form of drawing within a circle, “Mandalas were first used in therapy by Carl Jung, who found that the act of drawing mandalas had a calming effect on patients while at the same time facilitating psychic integration” (p. 148). Waterman (2011) has created a mandala drawing process in which graduate students use drawing and meditation as a means to rediscover their life direction (pp. 43-54). Other therapists have used this drawing form with clients as a way of calming and centering. Couch (1997)

documented her work with clients with dementia, and found that clients often chose mandala drawing as a form of expression in all stages of dementia. She explains that when brain injury or disease has caused damage to verbal abilities, mandala drawing can be a needed expressive tool. Horvitz and Schulze (2007) found that stroke victims were able to use art making to decrease stress and blood pressure, and elevate mood. They speculate that art therapy could decrease the incidence of stroke by lowering stress. Curry and Kasser (2005) found that college students could decrease their stress levels by coloring a structured mandala or plaid. In art therapy groups, Smitherson-Brown and Church (1996) directed children with attention deficit disorder or attention deficit hyperactivity disorder to begin each group by coloring a predrawn mandala as a way to promote their ability to focus. They found that the children improved their developmental level and attentional abilities, and decreased impulsiveness.

Henderson, Rosen and Mascaro (2007) found that clients with posttraumatic stress disorder were able to decrease the severity of their symptoms by drawing representations of their trauma within a circle. Cox and Cohen, (2000) used mandala drawing with clients with dissociative identity disorder (DID). They explained that because the illness is a fragmentation of the personality, a mandala could provide a much needed containing and integrating form. Cox and Cohen also combined categories that identify art made by clients with DID, with the mandala life stage categories created by Kellogg, in order to further clinicians' understanding of the nonverbal communications of these clients. Cox in Malchiodi (2003) explains Kellogg's Archetypal Stages of the Great Round of the Mandala, "Her theoretical model provides a symbolic way to map stages of psychological growth represented by different stages of consciousness..." (p. 429).

Authors, Smitherson-Brown and Couch also referred to Kellogg's stages within their articles.

Art therapy techniques for the integration of linear and non-linear thinking.

Chapman, Morabito, Ladakakos, Schreier, and Knudson (2001), Gantt and Tinnin (2007), McNamee (2003, 2004), Perrier (2007), and Talwar (2007), have developed specific art directives that rely on both art making and cognitive verbal tasks to encourage the integration of linear and nonlinear thinking as a means of promoting the healing of trauma. According to McNamee (2003) this trend began with the work of Cartwright (1999) who designed a bilateral art protocol. McNamee (2003) explained that bilateral stimulation refers to the use of both the verbal and nonverbal sides of the brain. Talwar (2007) and McNamee (2003, 2004) both sought to help participants transform negative cognitions through an art process.

Talwar's (2007) Art Therapy Trauma Protocol combined painting as a means of right hemisphere expression, and identifying thoughts verbally as a left hemisphere expression. McNamee (2003, 2004) used talk therapy and metaphoric drawing for the same integrative purpose. Drawing with the non-dominant hand was a component of Cartwright's bilateral art protocol that was designed to integrate linear and nonlinear thinking. Talwar (2007) and McNamee's (2003) art therapy methods also include the use of the non dominant hand in order to access nonlinear thought processes. McNamee (2004) invited clients to use either hand while making a scribble drawing. During Talwar's Art Therapy Trauma Protocol (ATTP) the participant painted with his or her non-dominant hand while focusing on body sensation and a negative self-statement in relation to a traumatic memory. The process continued with switching hands, papers, and

cognitions until the client had integrated the trauma and no longer felt upset when remembering the trauma.

McNamee (2003) documented the use of the bilateral art protocol with a person with depression. In this method the paper was divided into right and left sides, one for each hand. The client identified a conflict and the hand associated with each of two aspects. The client made a drawing that represented the two sides of the problem using different hands, and then “traces over” or “explores” (p. 285) the drawings with the hand that is opposite from the one that originally drew it. This is designed to integrate and resolve the conflict.

Gantt and Tinnin (2007) directed clients to create a sequential visual narrative as a means of integrating linear thinking with the emotional non-linear experience of trauma. Through this process cognitive meaning of trauma is established by the creation of the beginning, middle and end of the trauma story, even as emotional material is also experienced. Gantt and Tinnin designed an intensive treatment program for adult patients with post-traumatic stress disorder. Some subjects were also dissociative. Besides drawing a graphic narrative, patients learned to identify the instinctual trauma response (ITR) and included these stages in their drawings. The pictures were then displayed together and the subjects verbally told the story while being video taped. The tape can be viewed later. Gantt and Tinnin stated, “The combined verbal and nonverbal processing usually achieves cognitive closure and imbues the traumatic memory with past tense” (p. 70). With dissociative clients, a further technique is involved. Videotape was used to encourage clients to recognize and dialogue with different aspects of themselves. This study was conducted with 78 patients in an intensive outpatient treatment program for

patients with PTSD and/ or dissociative disorders. In the 1-2 week program the authors found that 44% improved, 8% were unchanged and 3% got worse. The improvement scores were found to be statistically significant.

Others have also worked with trauma victims to integrate the emotional impact of trauma with a cognitive understanding. Cohen and Cox (1991) work with adults who had experienced childhood abuse and were also dissociative, point to the extreme need for a means other than verbal to communicate and recover from the effects of abuse.

Kobayashi, Chen, and Park (2007) created art directives that cognitively identify post traumatic stress disorder symptoms, and help clients use art to work through complex traumatic experiences with group support.

Contemporary theories included in art therapy techniques: EMDR, body awareness, and movement.

Another way that researchers have sought to help clients integrate linear and non-linear thought was developed by Shapiro. Shapiro and Maxfield (2002) describe eye movement desensitization and reprocessing (EMDR) as a method that uses eye movement to integrate thoughts and feelings related to trauma or “complaints that follow distressing life experiences” (p. 934). In this method the unprocessed memories are accessed with associated memories and cognitions. The therapist directs the client through a series of back and forth eye movements and then pauses to hear the clients’ experiences and support the client to continue focusing on the memories as they come up for the client. Sessions continue until targeted memories and cognitions are rated by the client as no longer distressing. This relatively simple technique is now widely used and integrated into contemporary trauma treatment. Concepts related to EMDR have been included in art therapy techniques as a means of trauma resolution (Talwar, 2007;

Hudson, 2007).

Like the EMDR process, Talwar (2007) used a rating system to determine when a client has fully processed a trauma. Hudson's (2007) art directive instructed clients to create a mobile of trauma related images that employed eye movement when clients observed the rotating mobile. Hudson explained that the mobile is a representation of the internal balance the client who has unprocessed trauma seeks.

In Peter Levine's (1997) book, *Waking the Tiger: Healing Trauma*, he theorized that because trauma can remain frozen and unprocessed in the body, body awareness can lead a traumatized individual through the healing process. He understood the instinctual response to trauma as: to flee, fight, or freeze. Levine explained his belief that freezing is the response only if the victim does not have either of the other options. He expanded his theories further by defining the freezing response as a charged state in which the victim has intense energy available to fight or flee if the opportunity arises. If the individual does not have this opportunity, this energy may remain unprocessed. According to Levine though animals are easily able to process instinctual energies, the human brain's "complex and powerful" neo-cortex or rational brain has the ability to override the more subtle restorative processes of the reptilian core, which is a more instinctual part of the brain. In the method Levine named Somatic Experiencing, clients are directed to heighten their sense of themselves in their bodies. The therapist supports the client to focus on bodily sensation as it occurs and changes. The client verbally relates the experience, which includes descriptions of images and memories that emerge through the process. Levine believes that a person will work through the trauma by accessing his or her natural restorative abilities within the body by following his or her own images and

sensations. Art therapists Chapman et al., (2001), Gantt (2007), Hudson (2007), Pugh (2007), and Talwar (2007), all encouraged body awareness and images that are drawn from bodily sensation. Talwar sets up the painting table away from the place where clients paint to encourage walking back and forth to enable activation of both hemispheres of the brain.

Levine's (2010) focus on natural restorative abilities and integrative processing extended beyond those individuals who had experienced trauma, to a societal need. He stated, "As a society we have largely abandoned our living, sensing, knowing bodies in the search for rationality and stories about ourselves. Much of what we do in our lives is based upon this preoccupation" (p. 285). In this way he makes a connection between the restorative needs of traumatized individuals, and the restorative needs of normally functioning individuals within contemporary society.

Children's Drawings

Developmental drawing stages.

According to Lowenfeld and Brittain (1987), developmental drawing stages can give information about the cognitive level of the person who made the drawing. Though these stages were designed to be related specifically to children, developmental stages that reflect a specific cognitive approach can also inform adults when they seek to understand the underlying process of their drawings. In this way, individuals could understand more deeply the meaning of regression in their drawings. Cohen and Cox (1991) have documented evidence of regressed drawings in individuals who have experienced severe childhood abuse. It is also common that people who are functioning normally make drawings in a more regressed manner at times. Therefore Cox and Cohen

inferred that understanding developmental drawing stages can be beneficial in terms of self-reflection related to childhood ego-states.

Lowenfeld and Brittain (1987) have divided children's drawings into six stages that reflect normal cognitive growth. Early drawing stages include: Scribbling stage (2-4 years old), the Preschematic stage (4-7 years old) which is characterized by floating forms and images, and the Schematic stage (7-9 years old) which is characterized by stereotyped images lined up on a ground line. Older children and adolescents tend toward more realism and unique expression in the following stages: Dawning realism (9-12 years old), Pseudo-naturalistic stage (12-14 years old) and Adolescent art (14-17 years old). The text describes the drawing characteristics and shows examples of artwork by children at different stages of cognitive development that are related to approximate ages.

However, "Drawings tend to remain at the 12 year old level, without further instruction" (p. 479). Gantt and Tabone (1998) stated, "...there are relatively few studies on the [art] work of normal adults without artistic training" (p. 38). They continued that, "FEATS [formal elements art therapy scale] can show the actual differences between children's art and that of untrained adults" (p. 38).

Strauss (2007) also categorized the normal developmental stages that are reflected in children's drawings. She specifically detailed young children's drawings up to 7 years old. Though her descriptions agree with Lowenfeld's, she showed a much more detailed account of early drawing stages. Her understanding of the developmental drawing process was significantly different. Unlike Lowenfeld, she related drawings to stages of spiritual consciousness and also addressed how children's drawings possess qualities of the process of human history. For example young children's drawings include forms that

can be seen in petroglyphs and historically ‘primitive’ art work (pp. 18-20). With this in mind, adult drawers may be able to embrace the value and meaning of simple universal forms such as spirals, as well as the basic geometric shapes of circles, squares and triangles that are evident in any drawing. Waterman (2011), a graduate school professor, included Strauss in his writing and emphasizes the connection between the universal developmental process of children’s drawings, ancient cultural symbols, and adult student drawings which can reconnect an individual to their life purpose and direction (pp. 43-54).

Children’s drawings as trauma interventions.

Many of the methods used to help adults process trauma by integrating linear and non-linear thinking were also employed with children. Chapman et al., (2001) worked with a small sample of children who had experienced a medical trauma. They used the Chapman Art Therapy Treatment Intervention. This procedure began with a motor activity to relax the child and generate images, then proceeds by organizing images into a narrative, sequential format of the trauma. The authors then compared the reduction of PTSD symptoms to a group of children who received standard therapy. Though they found no statistically significant difference between the two groups, they speculated that, “anxiety and depression may be more descriptive of a child’s reaction to trauma than PTSD” therefore the PTSD measurement tool may have given inaccurate results (p. 104).

In Appleton’s (2001) work with traumatized adolescents, graphic fantasy is combined with a realistic depiction of the trauma. This combination of creative fantasy with the actual trauma was designed to help clients reconcile traumatic events through a series of stages. Creek’s (2007) work with latency age boys, who have experienced early

traumas, also included fantasy as a central component. She directed the boys through an adventure fantasy series of drawings. In this symbolic series the boys can face and overcome past traumas without necessarily addressing the specifics of their individual trauma experiences. The cognitive aspect is included in this intervention by means of the narrative format. Kloer (2005, 2007) believes that accessing the more emotional and often less conscious parts of the brain is essential to trauma resolution. Her work with maltreated children has lead her to believe that symbolic art representations and experiences in therapy are enough to help these complex trauma cases, who may not benefit from working on a cognitive understanding.

William Steele (2003) addressed drawing in short term trauma resolution with children and adolescents, and listed reasons that drawing is, “an important modality in trauma intervention” (p. 149). Though Steele’s focus was on using drawing with those who have experienced trauma, these reasons can be applied more generally to the therapeutic value of drawing as non-linear thinking with all populations. They include:

- 1) ...psychomotor activity...[can]...tap sensory memories
- 2)...safe vehicles to communicate what [individuals] have no words to describe
- 3)...engages children [and adults] in the active involvement in their own healing
- 4)...provides a symbolic representation...that is external and concrete therefore manageable
- 5) a visual focus on details that encourages...[individuals] to tell their story
- 6) drawing provides for diminishing reactivity (anxiety)... (p. 149).

The Benefits of Drawing for Non-Clinical Populations

Cross-Cultural and Historical Importance of Drawing and Art Making

World Book Encyclopedia (1990) defined drawing as, “the act of making a design or image” (p. 345) and states, “people have made drawings since prehistoric times” (p. 346). In Scarfstein’s (2009) text, *Art Without Borders*, he detailed and contemplated the complexities, similarities and uses of art throughout the world in historical as well as contemporary eras. He stated, “Without art, which is to say, without imagination that creates, appreciates, and embodies itself in art, human beings would be far sadder, duller approximations of what they in fact are.” He continued, “...human beings cannot remain human without art” (p. 3). His description of a contemporary Canadian Inuit artist, Piseolak Asoona (1905-1983) was one example of the important relationship an artist has with drawing. In her words, “I draw the things I have never seen, the monsters and spirits, and I draw the old ways.” A critic says of her work, “Her delightful energetic drawings captured the spirit of traditional life on the land and the vibrancy of her own spirit” (p. 311). The text includes specific drawing examples from other cultures including African, Chinese, Papuan, and European, which reinforced understanding art and drawing as a means of both personal expression and cultural continuation. Dissanayake (1995) echoed Scarfstein’s belief in the historical and cross-cultural importance of art making. She stated, “...the arts have always been with us. And so have ideas of beauty, sublimity, and transcendence, along with the verities of the human condition: love, death, memory, suffering, power, fear, loss, desire, hope, and so forth. These have been the subject matter of and occasion for the arts throughout human history” (p. 41). McNiff’s (2004) writing conveyed a similarity to Scarfstein’s and Dissanayake’s assertions that art making is

important in all cultures. McNiff credited Prinzhorn with the belief that “creativity is a basic human need and [as expressive arts practitioners we should] promote universal access to the healing powers of artistic expression” (p. 264).

Drawing Media and Surfaces

Goldstein (1977), a drawing instructor and author detailed the vast array of media that can be used to make drawings (pp. 174-214). He explained that various media produce differing responses. He stated

For the responsive artist, the substances that produce the lines and tones of drawing- *the media*- and the papers and boards that receive them -*the surfaces or supports*- simultaneously carry and influence his responses and thus are important in the forming of his works. (p. 174)

Robbins and Goffia-Girasek (2000) wrote about specific art media and how various media are therapeutic according to the inherent nature of the media to be more or less easily controlled. When referring to the therapeutic aspects of drawing materials they state

Colored drawing materials also offer a wide range of control, with colored pencils at one extreme and chalks at the other. Use of pencil and paper can be soothing in its ease of control, its structure and its firm boundaries. Crayons and magic markers offer slightly less definition and have permanence, lacking the pencil’s quality of being erasable. (p. 109)

They continued by identifying drawing media including cray-pas and pastels as media that are more fluid and produce less precise and more changeable images. He explains that these media, “could either free or frustrate the artist, depending on ego and

boundary strength” (p. 109). Therefore according to the needs of the person drawing, various drawing media can encourage more open expression or more organized control.

Similarly, Hinz (2009) identified the continuum from fluid to resistive media, and includes pencil drawing as a resistive 2D media. She credited Kagin and Lusbrink with developing the Expressive Therapies Continuum in 1978. Hinz states that according to this system, “...fluid media are likely to elicit emotional responses and resistive media are likely to evoke cognitive responses” (p. 32). Pencil is considered a resistive media because one must press down for it to work. Though ball point pen is not mentioned, it would be considered a resistive media because similar to pencil one must press down to get a line.

Hinz (2009) also discussed the choice of paper size as a preference for more cognitive or emotional expression. She stated, “Clients who are more expansive use larger pieces of paper and more supplies. Expansiveness can be related to a preference for the Affective ... Alternatively, some clients will use smaller paper... to convey [cognitive] meaning” (p. 199).

Allen (1995) promoted choosing drawing media and paper size according to each individual’s preferences. She stated, “... find a size and shape of paper and a type of line and pressure that feels pleasurable to you today. There is no right or wrong here...Big loose drawings are not better than small contained ones” (p. 22). Paintner (2010) suggested that time limited drawings with accessible media can support drawing expression. (p. 81). Henning (1986) wrote about the use of ink for drawing. When addressing drawing with ball-point pen he noted that they are “inexpensive,” “convenient,” and “... because of its availability, it is probably the means of producing

more drawings than any other ink medium” (p. 82).

Other Drawing Benefits

Many authors from other disciplines wrote about the benefits of drawing for a normally functioning population. Enstice and Peters (2003) emphasized drawings as “a process of *forming* something; it is a way... to materialize responses to things that are real or imagined.” They believe that this ability to draw is not based on talent, but instead on practice and application of basic drawing concepts (p. 12).

Csikszentmihaly (1990) a proponent of positive psychology utilizes the concept of flow. He defined flow as “an ordered state of mind that is highly enjoyable” and included making art as an example of a flow activity (p. 72). Csikszentmihaly identifies flow as “autotelic [defined as] a self contained activity...done not with the expectation of some future benefit, but simply because the doing itself is the reward” (p. 67). In Peterson’s *Positive Psychology* (2006), he includes Csikszentmihalyi’s concept of “microflow, very short duration activities that produce flow and may well have benefits for restoring attention. Doodling is just one example” (p. 69). Peterson (2006) explains that humanistic psychology made popular by Maslow and Rodgers, set the stage for positive psychology (p. 6). Duckworth, Steen & Seligman (2005) explained how Rogers’s and Maslow’s theories dovetail with the ideas behind positive psychology. Rodgers believed that “individuals have the power to move themselves toward better functioning.” Maslow focused on self-actualization, “a state [which allows individuals access] to the full range of their talents and strengths” (p.632). Peterson (2006) stated that, “Unlike many positive psychology concepts flow has been extensively investigated” (p. 67). He explained that study results indicate that flow occurs more easily in circumstances where there is a

balance of skill and challenge, and the activity is voluntary not coerced.

Art therapists have studied the benefits of drawing for some non-clinical adult student populations. These studies focused on using art to improve mood and reduce stress. Pizarro (2004) compared the use of writing therapy and art therapy as a means of processing a stressful or traumatic event. The 45 college students in the study were randomly assigned to one of three groups; write-stress, art-stress, or art-control. Students in the stress groups were directed to either write or draw, “your most stressful or traumatic current or past experience” (p. 8). Results indicated that writing improved social function, and drawers reported more enjoyment. The authors recommended, “Combining treatments, in which writing therapy is paired with art sessions, may encourage participants to continue therapy and may make therapy a more enjoyable experience” (p. 11). Petrillo and Winner (2005) questioned whether drawing improves mood and if so, was it due to catharsis or redirection in their study of 42 college students. They found that making a drawing after viewing tragic images improved mood in study participants. Because mood improvement was equal in individuals who made negative and positive images, the authors speculated that some students improved their mood through catharsis and others through redirection. Bell and Robbins (2007) recruited 50 adults (ages 18-30) through advertising posters at a local university to participate in their study that compared the mood effects of making a drawing or viewing famous paintings. Mild negative mood was induced by asking participants to make a to do list before participating in their randomly assigned group. The authors found that those who made a drawing had greater mood improvement than those who viewed art prints. Drake, Coleman, and Winner (2011) compared drawing to writing as means of mood repair. In

their study of 40 college students they found that drawing was more effective as a means of mood elevation after the viewing of a sad movie clip. They hypothesized "...that drawing may invite people to play with line and form, and hence may serve as a more effective form of distraction [than writing]" (p. 29).

Julliard, Intilli, Ryan, Vollmann and Seshadri (2002) studied drawings as indicators of stress among 16 family practice residents. Participants were instructed to make three drawings about, the first full year of residency, the stress of residency, and sources of support and rejuvenation. The authors concluded that because 80% of the drawings had negative themes, the drawings indicated "stress sufficient to cause some disturbance in psychological functioning" (p. 9). They suggested that "assessment and interventions for relieving stress... should be individualized... help them devise individualized ways of coping with it" (p. 10). Curl (2008) studied stress reduction via art making and cognitive focus. The 40 college student participants were randomly divided into 4 groups: two were instructed to maintain a positive focus while making a drawing or collage according to which group they were assigned. Two groups were instructed to maintain a negative focus while making a collage or drawing according to group assignment. Study results indicated that the specific medias did not have an impact on stress reduction, but that those who made art with a positive focus had a significant reduction in stress. Those who made art with a negative focus had a slight non significant increase in stress (p. 168). Mercer, Warson and Zhao (2010) studied the influence of visual journaling on reducing stress and improving mood in 5 medical students and 5 medical staff members. They stated "The visual journal successfully combines written and visual interventions for the experience of both emotional satisfaction and cognitive

awareness” (p. 144). Though the study population was small, the authors stated that “... the journaling intervention decreased stress and anxiety levels and decreased negative affect levels in most of the 10 participants studied” (p. 148).

Similar to Csikszentmihalyi, Allen (1995) described drawing as “energy made visible,” and suggests that while drawing “enjoy the natural flow of your own energy” (p. 23). Moon, (2008) emphasizes art making as metaverbal, meaning beyond words (p. 56). He explained that the value of art therapy is the fact that the art can express more than words. Don Jones (2006) writes that art making processes are “important attempts at self-healing” (p. 44). McNiff (2004) in describing his experience of drawing in administrative meetings states, “I was transforming a real source of conflict into art ...My drawings helped me to become more attentive...in a deeper way...” (p. 53).

Chodorow (1997) in her text, *Jung on Active Imagination* echoes McNiff’s assertion that drawing promotes the integration of conflicting material when she quotes Jung, “... it is with the hand that guides the crayon or brush, ... a dark impulse is the ultimate arbiter of the pattern, an unconscious apriori precipitates itself into plastic form” (p. vi). In this way Jung is describing the processing of unconscious images that strive toward resolution with consciousness and can be transformed through the making of visible art (plastic form).

In summary, the above contemporary authors named many benefits of drawing for a non-clinical population. These included drawing as a safe, non-verbal communication (Moon 2008) that can promote self-healing (Jones 2006), and mood elevation (Bell & Robbins, 2007; Drake, Coleman, & Winner 2011; Mercer, Warson & Zhao 2010; Petrillo & Winner, 2005; Pizarro, 2004). Csikszentmihalyi (1990) and Allen (1995) emphasize

drawing as a pleasurable expression. According to the studies of Curl (2008), and Mercer, Warson and Zhai (2010) drawing can help reduce stress. Attention restoration (Cisikszentmihalyi) was also named as helpful to those who draw. Enstice and Peters (2003) define drawing as a way to materialize responses to real or imagined subjects. McNiff (2004) and Chodrow (1997) refer to drawing as a means of resolving inner less conscious material or conflict.

Pilot Study Research

In a pilot research study (John, 2010) the focus was on the experience of 13 graduate students in two advanced counseling classes five art therapy class students and eight counseling class students. Both classes made free style drawings on blank 5”x 8” index cards at the beginning of each advanced counseling class. At the end of the 10-week quarter the experiences of the pilot participants were gathered through a final questionnaire that asked students about the advantages, disadvantages, and changes in attitude toward drawing as a means of expression. The results indicated that there was a qualitative difference between the two classes. All art therapy students found advantages to the process of making a small drawing series. The results from counseling students were more varied and included that it was: challenging due to a focus on verbal thought processes, difficult to accurately depict feelings, and not helpful at all. In this way the counseling students brought to light that unfamiliarity with drawing as a means of personal expression, inhibited these participants from gaining the advantages that making a small drawing series can offer. Tables 1, 2, and 3 show pilot study results.

Table 1

Student Named Benefits of Drawing Series

	Expressing/ Releasing Feelings	Enjoyable Fun	More attentive in class	Calming	Structure	Self Reflective	No Verbal Processing	No Benefits
% A	60	60	60	40	40	80	20	0
% C	25	75	0	0	13	50	13	13
Total	38	69	23	15	23	62	15	8

Note: % of students, A= Art therapy students, C= Counseling students

Table 2

Proportions of Students Who Named These Disadvantages

	Limitin g Structur e	Wanted Verbal Processing	Challenging due to Student's focus on Verbal Thought Process	Difficult to Accurately Depict Feelings	Not Helpful	No Disadvantages
Art	20	40	0	0	0	40
Counselin g	0	13	13	13	13	38
Total	8	23	8	8	8	33

Table 3

Proportions of Students Who Named These Attitude Changes

	No Change Like Art/Drawing	Positive Change	Did Not Answer	No Change Not Helpful
Art therapy	20	40	40	0
Counseling	40	13	25	13
Total	38	23	31	8

Conclusion

The focus of this literature review was to explore what has been written about the benefits of drawing for both clinical and non-clinical populations. Many art therapists and professionals from other disciplines have contemplated, researched and experienced the use of drawing for their clients and themselves. Because drawing has been practiced cross culturally since ancient times, the use of drawing is truly a vast topic.

A specific concern is that drawing as a form of creative expression has become repressed by contemporary society, and therefore many normally functioning individuals have not experienced possible benefits available to them through drawing. Gallas (1994), a researcher and teacher believed that, “the separation of art from life...[is] a process that often begins when children enter school...[and] represents a loss in expressive opportunities...” (p. 115). It is possible that drawing as nonlinear expression is uniquely positioned to remedy a cultural lack of support for nonlinear creative thinking among normally functioning individuals. The literature reveals that drawing has many potential benefits and is an easily accessible means of creative expression. Many individuals with a wide range of clinical problems have experienced the healing available through the drawing process. McNiff (2004) emphasized, “imagination can work closely with reason and science to solve problems and transform the conditions of group and individual life” (p. 221). Levine (2005) also advocated for including expressive arts in healing and problem solving (pp. 39-44).

Schroder (2005) offered drawing directives for clients who were reluctant to participate in the therapeutic process (pp. 30-37), and these could be helpful to normally functioning individuals who are uncomfortable and not familiar with drawing. However,

art therapy research literature does not address the therapeutic benefits available to normally functioning people other than students. Peterson and Wilson (2004, p. 91) state that America is "...a nation under stress." They identified American values that predispose its citizens to normalize ongoing stress (p. 92). Summerfield and McRae (2000, p. 620) wrote that though coping with stress has been widely studied, research has "yielded relatively little of either clinical or theoretical value." They called for the need to find new ways to help people cope with stress that are flexible to individual personality differences (p. 624). Drawing is a flexible tool that can be a way of coping, calming and creative expression. Those able to function normally might benefit from drawing as a creative nonlinear expression. Western societal function often demands limiting rational linear thinking and action. Stephen K. Levine (2005) wrote about the Greek idea of poiesis, defined as, "activity that brings something new into the world" (p. 16). He emphasized the need for "an attitude of playfulness, open to possibilities and discovery" (p. 71). He stated, "Poiesis depends upon our capacity to respond, with full range of human resources, to what effects us. Only in this way can we take account of both the wonder and the horror of the world in which we live" (p. 73). Drawing as an expressive and creative form, may offer normally functioning individuals a means of fuller expression that can in some small ways promote more creative action in society.

CHAPTER THREE

Method

The focus of this study was the experience of making a series of small drawings over a 10 week period of time. Normally functioning adult participants were instructed to make one 10 minute drawing per week, and given 10 5" x 8" index cards and a black ball-point pen for this purpose. In this study participants were asked to find a regular time and place to make a weekly drawing. The initial paperwork sent to participants described study instructions, and drawing suggestions. Initial data collected on the pre-intervention questionnaire included participants age, gender, and occupation and three Likert scale ratings. These self-report Likert scales included ratings of: perceived ability to use drawing as a means of self-expression, previous experience with drawing, and opinions about realistic drawing. Participants were instructed to return the initial questionnaire before beginning the study.

The post-intervention questionnaire included self-report Likert scale ratings of: perceived ability to use drawing as self-expression after completing study; the helpfulness of study-specific elements, and possible advantages and disadvantages that were named in the pilot study. Participants were also given lines under each rating in both the pre and post-test to write comments about their ratings. Three additional questions were asked on the final post-test questionnaire, if there were any variations from study instructions; the possible influence of knowing the researcher, and any additional comments. The instructions, drawing tools, and questionnaires were contained within a drawing packet that was given to each participant.

Research Questions

The primary research questions was, in what ways did the normally functioning research participants use the making of a series of small drawings as a means non-linear of self expression? Within this primary question, other questions that guided the research were related to the specific techniques employed. They were as follows.

1. Did the perceived ability of participants to use drawing for self-expression change as a result of the study?
2. What were the experiences of participants who make this drawing series?
3. In what ways did the participants find the study techniques as helpful?
4. In what ways did the participants find the study techniques as unhelpful?
5. Did participants perceived ability to use drawing as a means of expression change as a result of the study?
6. In what ways did participants' first and last drawings reflect his or her report of change or no change indicated by pre and post questionnaire responses?

The Drawing Packet

The first page of the drawing packet included the purpose and directions for participation in the study. The purpose of the study was written as follows.

Purpose of the study: Drawing can be a way to express and process thoughts and feelings. In this study participants will establish a regular drawing practice as a means of self-expression. The study is designed to fit into the busy pace of contemporary life. Drawing for ten minutes at a time on small cards is an accessible way to include drawing into one's lifestyle. The purpose of this study is to determine the possible benefits of integrating this drawing practice into each participant's life. A questionnaire will give

participants the opportunity to document their experience of making a small drawing series.

Directions for study participation and suggestions for drawing read as follows.

Directions: Please follow the directions as much as possible. If some aspect(s) of the directions make it difficult for you to continue in the study, change them in a way to make it possible for you to continue, and document the changes on your final questionnaire.

- 1. As much as possible find a regular weekly time and place to make each of the ten consecutive drawings. The drawing cards are numbered 1-10.*
- 2. Use the pen on the cards to make drawings. Take about ten minutes to do each drawing.*
- 3. Each drawing card has a lined and blank side. Draw on the blank side, and add any words connected with your drawing experience on the lined side.*
- 4. Suggestions for drawing:*

Drawing is a means of self-expression, so any way you draw is expressive.

One way you can think about drawing for self-expression is that it is like doodling.

A technique that could be helpful is to find pictures in a scribble drawing. See example below. [a scribble drawing example was included on the first page]

Because the pilot study (John, 2010) results indicated that those unfamiliar with drawing as a means of self-expression described fewer benefits than those familiar with drawing, suggestions for how to make expressive drawings were included. These suggestions were chosen to encourage participants to draw freely and not be intimidated by the drawing process.

The elements of the drawing packet were designed to address the needs of normally functioning adults who may have busy schedules, and possible unfamiliarity with drawing as a means of self-expression. Therefore participants were instructed to make short drawings; and use familiar, portable 5x8 index cards and a black ballpoint pen. The 10-week length of the study was designed to allow participants to have time to become comfortable, and find their own way to use the drawing process. A regular time and place for drawing was encouraged as it can reinforce comfort through rhythm and practice. Index cards with blank and lined sides were a means of encouraging and giving space for both linear and nonlinear thinking in the process of self expression.

Pre and Post-Intervention Questionnaires

The initial questionnaire was designed to gather participant data including age, gender, and likely socioeconomic class (occupation), and to document participants initial familiarity, comfort with using drawing as a means of self expression, and opinion about the statement, “The best drawings are like photographs and realistically portray subjects.” Participants were instructed to return the initial questionnaire and consent forms before beginning the study.

The final questionnaire was designed to understand participant experiences of making the drawing series and to determine if making the series enabled them to become more or less comfortable with drawing as a means of self expression. Participants were asked to rate, post- study ability to use drawing for self expression; advantages and disadvantages of their experience; the helpfulness of study elements and drawing suggestions. Participants were also asked about deviations from study instructions, and if knowing the researcher influenced participation or attitudes toward the study.

Consent forms.

Participants were given a research consent form and a consent form for use and/or display art approved by the Lesley University Human Subjects Committee. These forms informed participants of their rights including the freedom to withdraw from the study at any time. Participants were instructed to include these signed forms with the initial questionnaire before beginning the study. Data received were kept in a secure location in order to maintain confidentiality and anonymity.

The Drawing Cards as Data

In the pilot study participants' drawings were not used as data. In the current study drawings were used as a further means of understanding participants' experiences of making the drawing series. With this in mind, the drawings were viewed as a means of further evidence of change or no change in participant's comfort with, and individual style of drawing for self-expression. Differences and similarities between the first and last drawings of each participant were examined for associations with the pre and post responses to a participant's perceived ability to use drawing for self-expression. In the initial instructions participants were invited to include words about their drawings on the lined side of the cards. Words from the lined side of the card were sorted into themes that contributed some qualitative understanding of participants' experiences of making the drawing series. The researcher and an advanced art therapy student coded this data.

Participants

A convenience sample of adults that included primarily colleagues and acquaintances were invited to participate in the study. Invitations to participate were sent via email or holiday card. The invitation to participate read as follows.

In January I will be starting my dissertation research about drawing/doodling as a means of self-expression. You are invited to participate. Beginning in January participants will be asked to make a series of small drawings, and fill-out two questionnaires. This is a ten week study in which participants will make one ten minute drawing each week.

Let me know if you have questions and or wish to participate. I can be reached via phone 505-473-1153 or by email deborahjohn@hotmail.com

Thank-you for considering this, Deborah

Those who chose to participate received a drawing packet via mail, work or neighborhood mail slots, or directly. Approximately (actual number unknown) 100 invitations to participate were sent out to adults within the researcher's social and professional network. Forty people completed the initial paperwork to participate in the study. Thirty completed and returned the study. Eight did not complete the study. Most of these participants suggested that their schedule did not allow completion; one explained that she wanted to paint instead, and one said he had totally forgotten about the study. Two people made drawings daily for 10 days instead of once a week. Of these one made a decision that she would rather draw daily instead of once a week, and the other misread the instructions. These two were excluded from the study data.

CHAPTER FOUR

RESULTS

Participant Data

There were 30 Caucasian adult participants who ranged in age from 30 to 78 years old (mean age = 54.6 years). Twenty-nine were Americans and one was a Canadian. The Canadian was raised in the United States, and then married a Canadian and moved to Canada. Twenty-two (64%) participants were female and eight (36%) were male. Table 4 shows participants' ages, genders and professional status.

Table 4

Participant Characteristics N=30

Characteristics		
Age	54.6 (10.82)	
Gender	36% male	64% female
Professional status	77% professional	23% non-professional

Table 5

Individual Age, Gender, and Occupation Data for Participants N=30

ID number	Age	Gender	Occupation
1	78	M	Retired
2	77	F	Retired
3	54	F	Pediatrician
4	63	F	Urban Planner
5	56	M	Gardener
6	59	F	College Administrative
7	58	F	Drama Teacher
8	51	F	Homemaker
9	30	F	Counselor
10	63	F	Office Manager
11	60	F	Finance Manager
12	61	F	Religious Educator
13	31	F	Barista
14	52	M	Lawyer
15	60	F	Administrative Assistant
16	66	F	College Teacher
17	58	F	Graduate Student
18	46	M	Nurse/writer
19	50	F	Freelance design/website editor
20	52	F	College Admissions
21	57	F	Artist
22	60	M	Elementary Teacher
23	36	F	Mother
24	52	F	College Teacher
25	51	F	Life Coach/ Laughter Yoga Teacher
26	57	M	Pre-K teacher / Artist
27	53	F	Art Therapist
28	50	F	Teacher
29	40	M	Police Officer
30	57	M	Psychologist

Twenty-three participants named professional occupations that require college or specific training including: pediatrician, urban planner, college administrative, drama teacher, counselor, office manager, finance manager, religious educator, lawyer, administrative assistant, college teacher, nurse, freelance website design/website editor, college admissions, artist, elementary school teacher, life coach/ laughter yoga teacher,

preschool teacher/ artist, art therapist, police officer, and psychologist. Seven participants named non-professional occupations including: two retired (both successful in business-business owner, business executive), one homemaker and one mother (both with college degrees), one gardener, one barista (graduate degree in creative arts therapies), and one graduate student (2nd career graduate school in art therapy). Four of those who named non-professional occupations had college degrees, two were successful in business and one was a gardener.

Pre-Intervention Questionnaire

Question 1.

Participants rated their perceived ability to use drawing for self-expression on a Likert scale (1 = no ability to use drawing for self expression and 5 = easily able to use drawing for self expression). The mean score was 3.67 ($SD = 1.24$). Written comments about question 1 were divided into three categories according to the self-reports of the participants. Nineteen (63%) of the participants rated their ability to use drawing for self-expression at the top of the scale as a 4 or 5. These participants wrote about being experienced with and enjoying drawing. Those who rated themselves as 4 sometimes included an explanation about why they did not rate themselves as a 5. Participant 21 stated an example of this, “Being a professional artist I am perhaps too judgmental about drawing quality and disparity between results and mental vision to feel easily able to self express.” Similarly, participant 19 stated, “I would have put a 5 except that I am nervous about drawing on demand.”

In the mid range category, five (17%) participants rated themselves as 3. Three of these referred to drawing for other than self-expression, and two wrote about not drawing

regularly. Of those who rated themselves as 1 or 2 (six participants, 20%), two participants wrote that they doodle. One wrote about a lack of confidence and a desire to learn. Another wrote that he does not draw, and another that she has not done this for many years. Participant 30 who rated himself as 1, made no comments about his rating.

Table 6

Participants Initial Ratings on Ability to Use Drawing for Self Expression

<i>Ability Rating of 4 or 5</i>	<i>Ability Rating of 3</i>	<i>Ability Rating of 1 or 2</i>
63%	17%	20%

Question 2.

The second pre-intervention question asked participants to rate previous drawing experience (1= no drawing experience since childhood and 5 = have taken drawing classes and draw regularly). The mean rating was 3.30 ($SD = 1.24$). Most study participants ($N = 22$; 73%) named some drawing or art classes they had taken. These ranged from one landscape drawing class (participant 2), a high school mechanical drawing class (participant 29) or a few college art classes, to trained artists with college art degrees. Fourteen (47%) rated themselves as a 4 or 5 indicating a significant amount of drawing experience. Seven (23%) rated themselves as a 3 indicating some art experience or training. Seven participants wrote that they had no or little art classes or training, and two others rated themselves as 1 in this category so a total of nine or 30% had little or no training. Untrained participants were found in a range of ability to use drawing for self-expression as reported in the pre-intervention. Five (30%) rated themselves as a 1 or 2 in ability to use drawing for self expression, three themselves as a 3 and one rated herself as a 4 in ability to use drawing for self expression.

Question 3.

Participants were asked to rate their opinion of the statement, “The best drawings are like photographs and realistically portray subjects” (1 = totally true and 5 = totally false). The mean score was 4.14 ($SD = .95$) indicating that participants tended to believe that this statement was false. Written responses from participants clearly reflected ratings chosen. Sixteen (53%) chose a 5 rating meaning that they found the statement totally false. Comments indicated that these participants believe that expressive drawings are better than realistic drawings. Those who rated 4 ($N = 4$; 13%) indicated some value in realistic drawings, but still preferred more expressive drawings. Participants ($N = 10$; 33%) who rated this question as a 3 generally indicated an equal value of realistic and expressive/abstract drawings. No participants indicated a belief that realistic drawings are better than expressive/abstract drawings.

Post-Intervention Questionnaire

Question 1.

In the post-intervention questionnaire, participants were again asked to rate their perceived ability to use drawing for self-expression, to determine if perceived ability had changed as a result of the study. The post study mean rating was 4.08 ($SD = 1.17$). A comparison of the post intervention mean to the pre intervention mean score of 3.67 ($SD = 1.24$) using a one-tail t test showed a significant change ($p = 0.012$). In individual post testing results ($N = 30$), 14 (47%) reported improvement in their ability to use drawing for self-expression, 12 (40%) reported staying the same in their ability, and 4 (13%) reported a decline.

Of the 30 participants, 4 rated themselves as having lower ability to use drawing

for self-expression after the study. These 4 were contacted via email and asked the question, Why do you think you might have rated yourself lower on this scale after completing the study? Full text responses follow.

Participant 9, a 30-year-old female replied as follows. “I have no idea. That does not make sense in general terms... It could be seen as an error or I was moody and being philosophical, in which case I pondered the possibility that after *trying* to express myself through weekly drawings, how hard is actually is to put my sometimes very complex feelings into a quick doodle. Does that make sense?”

Participant 11, a 60 year old female replied, “I’m not really sure why. I think that before I started the study I had an idea that things would flow easily. After starting I found that I had more difficulty getting the drawings to come. Maybe I was trying too hard.”

Participant 8, a 51 year old female replied, “Oh, geez, I didn’t look at the question, I have no idea:) I’d probably amend that knowing I answered it twice, and answer it the same both times (4). I had lots going on **during** the study and had to let it go a couple of times. I think I mentioned that I hurt my hand pretty badly in March and couldn’t hold a pen for a good long while.”

Participant 29, a 40 year old male replied, “I didn’t recall what I had rated myself initially but now that you mention it, here is my best guess as to why I chose 3... I am a fairly creative and optimistic person, though cautious at times, which is why I would choose a 3 to start confident but not overtly. Toward the end of the study I was less enthused about sitting down and drawing because I had other stuff I wanted to do so it felt like a bit of a chore. In addition to this I really don’t know why I was drawing the

things I was and would have liked some guidance or feedback from a professional on what they saw in order to make the experience more relevant and useful i.e. feeling like I was making some progress or getting some insights...etc... I'm not sure if this helps or not and FYI I am an ENFP on the Myers Briggs if that helps. I think maybe the extrovert in me needs an interactive experience. Just a guess.”

The initial self-reports of these four participants varied. Participants 8 and 11 both rated themselves as 4 on ability to use drawing for self expression and 3 after completing the study. Participant 8's explanation seems most related to her hand injury. Participant 11 thought it would be easier than she experienced in the study. Participant 9 began with a 5 rating of ability and then downgraded herself to 4-5. Her explanation focuses on the difficulty of drawing complex feelings especially in a short time frame. Participant 29 began with a 3 rating and ended the study with a 2 rating. His description of why focuses on wanting more interaction in his experience rather than a solitary experience. These varied reasons emphasize the individual nature of drawing for self-expression and responses to the techniques employed. These individuals may have benefited from a consultation and dialogue that generated specific suggestions in response to the participant's concerns.

Question 2.

Participants were asked to rate study elements. Comments and ratings about the elements of the study reflected personal preferences among participants. Since all mean ratings of elements were over 3 on a 5-point scale (1 = extreme disadvantage and 5 = extremely helpful) the elements of the study were generally considered helpful by participants. Twenty-six participants (87%) wrote at least one comment in response to

the elements of the study. Six made specific statements about the structure of the study as helpful. The three most commented on elements were: regular time ($M = 3.45$, $SD = 1.21$), regular place ($M = 3.79$, $SD = 1.05$) and pen use ($M = 3.38$, $SD = 1.29$).

Many participants ($N = 11$; 37%) wrote that it was difficult to make a drawing at a regular time each week, and three (10%) wrote that having a regular time was helpful. Seven (23%) participants said that having a regular place was difficult, and five (17%) named a regular place as helpful. Ten (33%) participants wrote that they wanted another media other than pen, and two stated that pen use was preferred.

On the mean ratings of the helpfulness of study elements, card size was rated as the most helpful element ($M = 4.20$, $SD = .81$). Seven participants wrote comments about liking the card size, and one said he would have preferred a larger size. Two-sided card use with a blank-side to draw on, and a lined-side to write on had a mean rating of 3.93 ($SD = 1.04$) suggesting that using both sides of the card was helpful. Only one participant left the back of her cards blank. All others wrote on the back of at least one card. Four participants made comments about the 2-sided card. Of these, two explained that they preferred drawing on the lined side of the card. One stated that she had only used one side of the card, though in fact she had followed the directions and drawn on the blank side and written on the lined side. Another did not rate the 2-sided card category and asked the question, "Aren't they always 2-sided?" She also had drawn on the blank side and written on the lined side. These two participants did not understand what the researcher was asking. Table 7 shows the mean ratings and standard deviations of study elements.

Table 7

Mean Ratings (SD) of Study Elements

Card Size	2-sided card	Regular time	Regular place	Pen
4.20 (0.81)	3.93 (1.04)	3.45 (1.21)	3.79 (1.05)	3.38 (1.29)

Question 3.

Participants were asked to rate initial suggestions for drawing in the pre-intervention instructions from 1 = not helpful to 5 = extremely helpful. There were three suggestions; drawing is like doodling; scribble drawing example, and drawing can be used for self expression. Drawing for self-expression ($M = 4.60$, $SD = 0.72$) was clearly rated as the most helpful suggestion. Only two participants rated this suggestion lower than 4. The comments that accompanied these lower ratings (3, 2), both indicated that having more structured suggestions was more helpful.

Doodling ($M = 3.87$, $SD = 1.17$) was rated as the next most helpful suggestion. Nineteen (63%) participants rated doodling as a 4 or 5. Eleven (37%) rated the doodling suggestion as a 3 or lower. Of these, seven participants rated 3, three participants rated 2, and one participant rated 1. Comments that were written by the four participants with the lowest ratings explained that the participant does not doodle (2), and that this context is not as valid as self-expression.

The scribble drawing suggestion and example were rated as the least helpful, though still maintained a mean rating of 3.37 ($SD = 1.30$). Thirteen participants rated the scribble a 4 or 5. Comments about these ratings did not specifically relate to the scribble, instead the comment space was left blank or a statement about all suggestions being helpful was written. The ten participants who rated the scribble as 3 wrote more comments about the value of the doodling suggestion. Similarly, most of those who rated

the scribble as a 1 or 2 ($N = 7$) did not write much if any about it. Comments did include: “don’t ...scribble” and “so foreign to me that it was not relevant.” Table 8 shows mean ratings and standard deviations for drawing suggestions.

Table 8

Mean Ratings (SD) for Drawing Suggestions

Doodling	Scribble	Self-Expression
3.87 (1.17)	3.37 (1.30)	4.60 (0.72)

Question 4.

The advantages named by pilot study participants including: expressing feelings, enjoyment/fun, calming, more attentive and self-reflective were rated by this study’s participants from 1 = did not experience to 5 = experienced as extremely helpful. These advantages had mean ranges from 3.72 to 4.26. Highest among these were enjoyment/fun ($M = 4.26$) and calming ($M = 4.25$). Twenty-five participants (83%) rated enjoyment/fun as either as 4 or 5. Four participants rated fun as 3 or 3.5, and one rated fun as 1 at first, and 5 when warmed-up. Written comments from those who rated fun as 3 or 3.5 included, “like homework.” “What would someone read into my drawing?” and “There is inherent tension for me with this modality.” There were no 1 or 2 ratings in this category.

Twenty-one participants (70%) rated calming as a 4 or 5. Eight rated calming as a 3 or 3.5. Included in the comments of these participants are the quotes from 3 ratings about fun. One participant rated calming as a 2, and stated that the “Choice of subject matter [what she drew] surprised me.”

The categories of expressing feelings ($M = 3.72$), attentive ($M = 3.80$) and self-reflective ($M = 3.83$) had very similar mean ratings. Eighteen participants rated expressing feelings as a 4 or 5, and twelve gave a 2 or 3 rating. Comments from these lower ratings emphasized fun and or external rather than internal focus.

There were nineteen participants who rated more attentive as a 4 or 5. Eleven rated attentive as a 1, 2, or 3. The lowest ratings (three participants) of 1 or 2 commented about not understanding the question. One asked, “More attentive to what?”

Twenty participants expressed that the study helped them be self-reflective by rating

this category a 4 or 5. Ten participants rated self-reflective as a 1, 2, or 3. Two of the three who rated the self-reflection as a 1 or 2 commented that they did not think about being self-reflective or use the drawings in this way. Table 9 shows mean and standard deviations for advantages of the study.

Table 9

Mean (SD) Numbers for Advantages of the Study

Expressing Feelings	Enjoyment/Fun	Calming	More Attentive	Self-Reflective
3.72 (1.19)	4.26 (0.71)	4.25 (0.92)	3.80 (1.16)	3.38 (1.05)

Question 5.

Participants were asked to rate two specific disadvantages (1 = experienced as an extreme disadvantage to 5 = did not experience as a disadvantage) that were named in the pilot study: (1) Challenging due to a verbal thinking focus $M = 4.18$ ($SD = 1.15$), and (2) difficult to accurately depict feelings $M = 3.79$ ($SD = 1.24$). Twenty-one participants used

a 4 or 5 to express that they had little or no difficulty drawing due to a verbal thinking focus. These participants tended to include no or little comment about their rating. The six participants who rated this challenge as 3, also made few comments. Two of the three lowest ratings (2.5, 1, 2) participants included comments about needing to be free or scribble to allow the flow of thoughts and feelings.

In the category of difficulty to accurately depict feelings, nineteen participants rated 4 or 5 indicating that they had no or little difficulty with this. The four who gave a rating of 3 did not comment on their ratings except for one who stated, “did not have the intention of depicting feelings... feelings did emerge...uncertain about what the statement means.” In the lowest range, six participants rated 1 or 2. Comment themes included not being open to feeling expression, feeling expression happening without intent, and “difficult to depict feelings.”

Table 10

Mean Ratings of Disadvantages

Challenging due to verbal focus	Difficulty to accurately depict feelings
4.18 (1.15)	3.79 (1.24)

Participants also named some other disadvantages. These included the desire to use words and color, and a different drawing tool. Another theme was about initial apprehension and the effort of trying to get into a state of mind that allowed drawing to proceed.

Question 6.

Participants named two primary reasons that knowing the researcher influenced their study participation. Nine participants (30%) wrote that they had begun and/or finished the study due to knowing the researcher. Thirteen (43%) said that their comfort level in study participation was increased or decreased because they knew the researcher. Six (20%) reported increased comfort level and seven (23%) reported decreased comfort level. Seven (23%) reported that knowing the researcher had little or no influence in their participation and three (10%) did not know the researcher.

Table 11

Influence of knowing researcher

Finished and/or Started Study	More comfortable	Less comfortable	Stated no influence	Did not know researcher
30%	20%	23%	23%	10%

Question 7.

Participants named many deviations from the study directions. Only one stated that she had not deviated from study directions. Twenty-four (80%) participants named deviating from study directions by doing the study drawings at different times at least once. Six (20%) wrote that they had made the drawings in different places. Eight (27%) named using a different drawing tool than the pen provided. Two (7%) stated they used color, and two (7%) stated that they drew on paper other than the card. Two (7%) used the lined side of the card to draw on. One (3%) named drawing other than the recommended amount of time.

Table 12

Deviations from Study Directions

Different Time	Different Place	Different Drawing Tool	Used Color	Used other than Drawing Card	Drew on Lined Side	Different amount of drawing time
80%	20%	27%	7%	7%	7%	3%

Question 8.

Participant responses to the question of additional comments fit easily into two basic categories: those who expressed appreciation and benefits of study participation, and those who wanted something more or different in the study. Those in the first category (18, 60%) named many specific benefits including: found another reason to draw, understand art therapy better, liked weekly commitment to draw, calming/centering, fun/enjoyment, check in with self, increase hopefulness, process or reflect upon feelings, nonjudgmental drawing, and see patterns/continuity that increase self-understanding. Four participants (13%) named negative aspects of the study. Two of these wanted more guidance and structure in the study, and two wanted to be able to draw better (#12) and criticized their drawing ability. Seven participants left this question blank, and one wrote “no thank-you” (27%).

Table 13

Anything additional You Would Like to Share with the Researcher

Appreciation/Benefits 60%	Negative aspects 13%	Blank/no thank-you 27%
Weekly commitment	More structure/ guidance wanted	
Calming/centering	Wanted to draw better/ criticized drawing ability	
Understand art therapy		
Fun/ enjoyment		
Check-in with self		
Increased hopefulness		
Process/reflect upon feelings		
Non-judgmental drawing		
Patterns/continuity		
increase self understanding		
Found another reason to draw		

The Drawing Cards As Data

The 30 study participants each made 10 free style drawings totaling 300 drawings by normally functioning individuals. Participants were also invited to write on the back of the cards as follows, “Add any words connected with your drawing experience on the lined side.” Because each participant was invited to use words about their drawings, these writings reflect individual styles of using the drawing for self-expression. The researcher and an art therapy student assistant coded participants’ back of the card writings into categories including: (1) feelings expressed, (2) responses to the drawing process, and (3) external influences.

There were nine untrained (rated themselves as a 1 or 2 in drawing experience) individuals who participated in the study. Drawings and back of the card writings from each of these participants have been chosen to show that even this inexperienced group

used drawing as a way to express and process feelings about life circumstances. In this way these participants support the idea that drawing is a natural form of processing and integrating life experiences.

Table 14

Example Quotes From Untrained Participants

Participant #	Quotes from the Back of the Drawing Card
2	Card 8 "My daffodil path to the trails- will miss it .It is my favorite spring view"
10	Card 1 "I'm feeling really overwhelmed! Gobbled up! Can't cope. Feeling helpless... Debts, work, worry issues are gobbling me up."
12	Card 8 "Next steps in my life? Too many choices- too many questions"
14	Card 7 "Pandora's box . Lid ajar."
15	Card 5 "A Phone conversation was happening...as I doodled...a bit troubled ...by the energy"
22	Card 8 "A ten year old student"
23	Card 2 "...Rebirth Life after Tragedy"
29	Card 3 "Unexpected Root Canal..."
30	Card 6 "When your heart just breaks..."

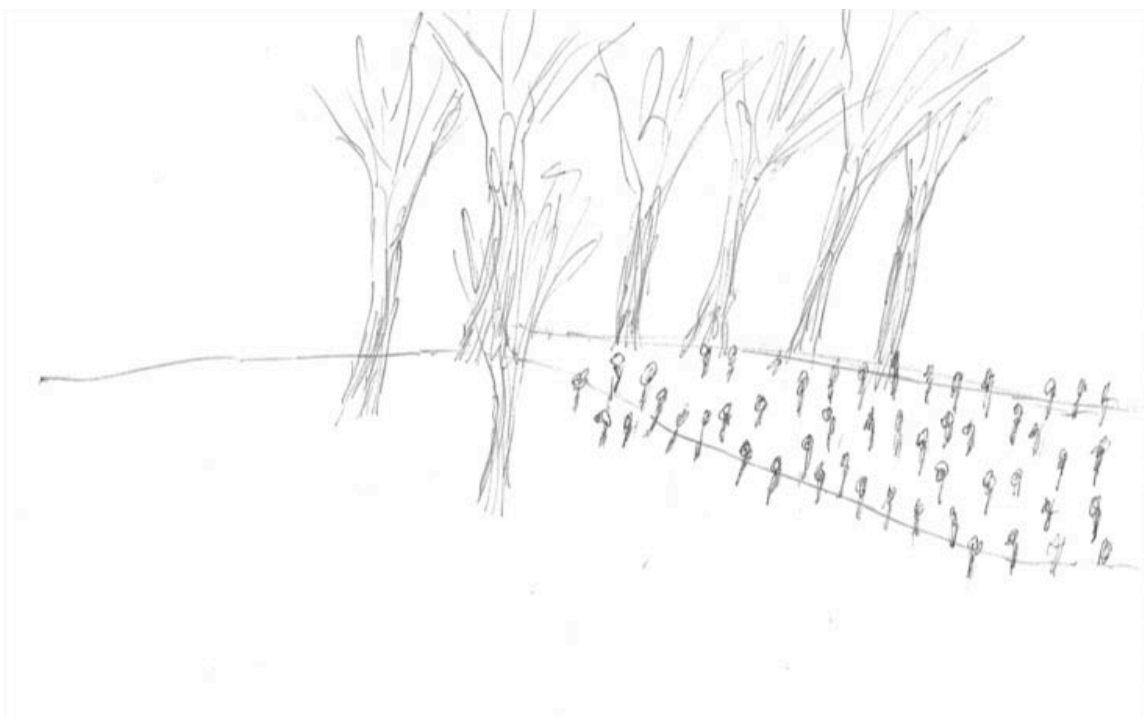


Figure 1. Participant #2 drawing of daffodils she will miss



Figure 2. Participant #12 drawing of choices



Figure 3. Participant #14 drawing of Pandora's box



Figure 4. Participant #29 drawing of unexpected root canal

All participant drawings were qualitatively compared according to similarities and differences between the first and last drawings within three categories of post-test results. Ability to use drawing for self-expression was rated prior to beginning the study and after completing the study. Participant's ratings reflected higher (47%), stayed the same (40%), or decreased ability (13%). Comparing drawings within these categories gives some support to individual rating categories.

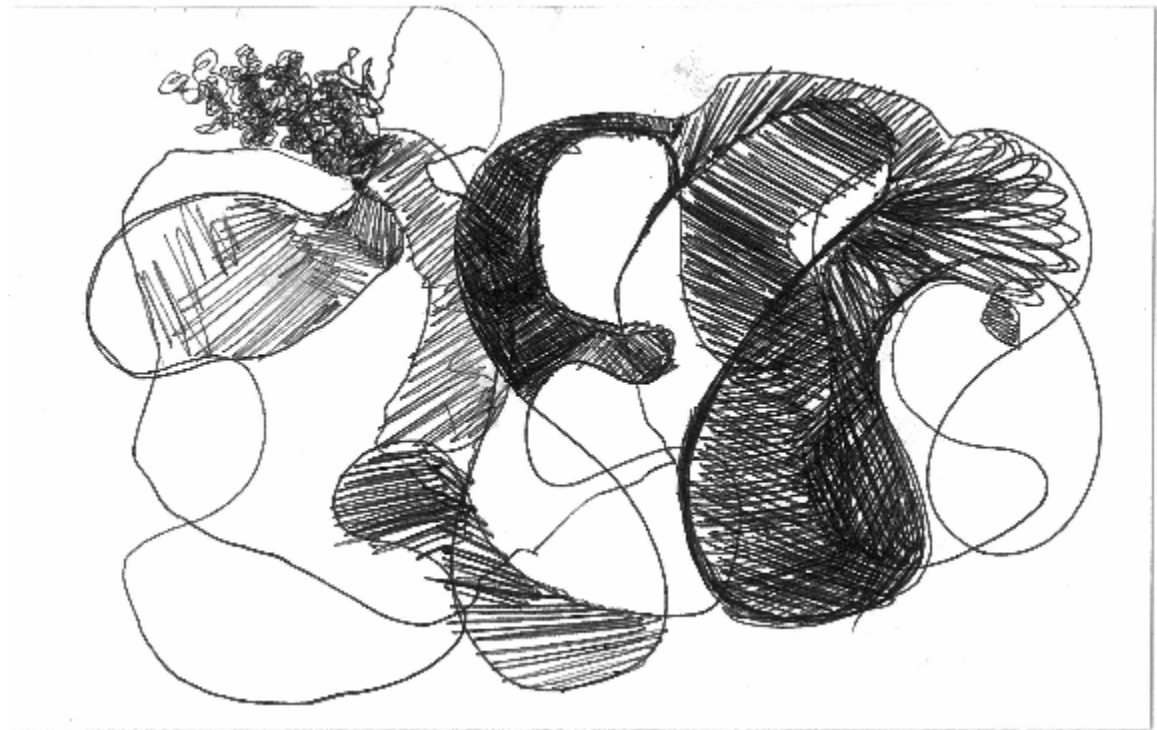
Participants whose ability stayed the same.

Twelve participants reported ability to use drawing for self-expression stayed the same (participant numbers 1, 2, 6, 12, 13, 14, 16, 18, 20, 21, 26, 27). The individual themes of the first and last drawings of each of these participants showed theme and/or subject similarities. Included in the themes of the first and last cards were both realistic and abstract images. Examples include: outdoor scenes, people, faces, geometric design, and positive outlook with words. One participant (#21) made a still life on her first card and a looser landscape on her last card, which are both within the theme of an external influence. Though these participant themes were consistent, some change (similar to participant #21) was evident in eight of these 12 participants in this category, who used more of the page and or made looser, more expansive drawings on their last card compared to their first card. Writing on the back of the first and last cards also revealed theme/ subject similarity. Example quotes are in table 15.

Table 15

Back of the Drawing Card Quotes from Participants Whose Ability Stayed the Same

Participant #	First card	Last card
1	bog turtles in our swamp [external influence]	A tree appears [external influence]
13	make scribble...explore spaces [process]	skipped one day...image in mind [process]
14	Happy face...male [feeling]	Happy woman [feeling]
21	broken shell...on table [external influence]	tsunami disaster [external influence]
27	...Anger [feeling]	Too much [feeling]

*Figure 5A. Participant #13 first drawing*

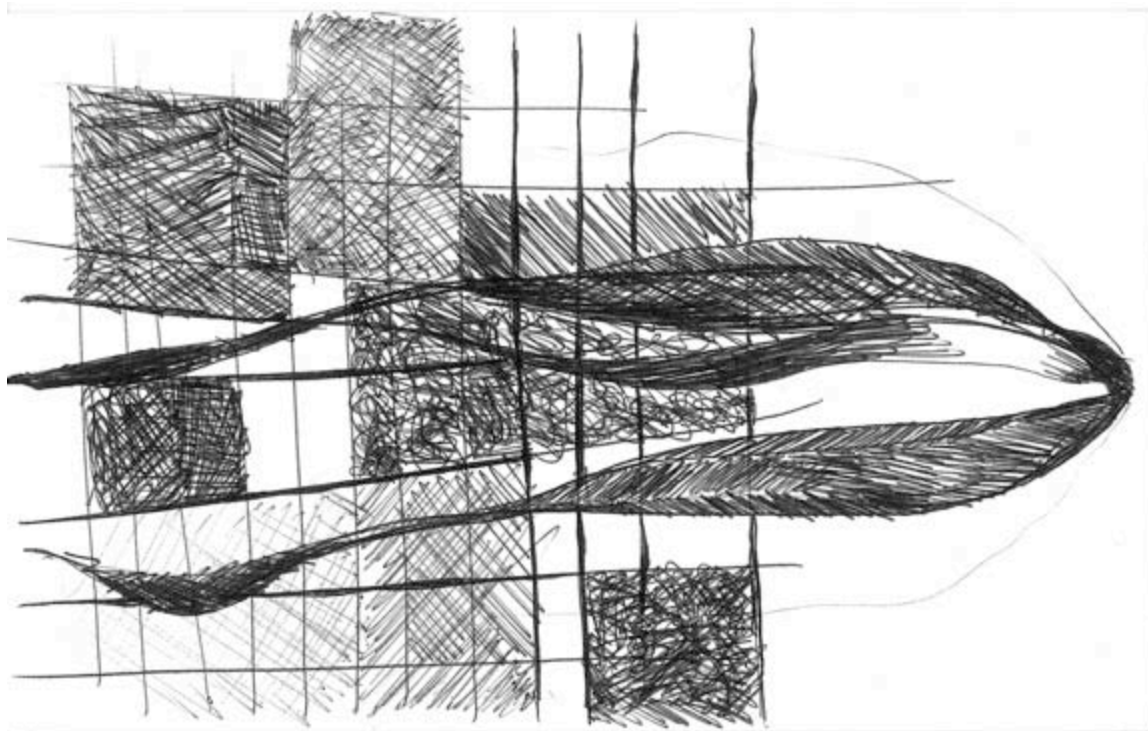


Figure 5B. Participant #13 last drawing



Figure 6A. Participant #14 first drawing



Figure 6B. Participant #14 last drawing



Figure 7A. participant #21 first drawing

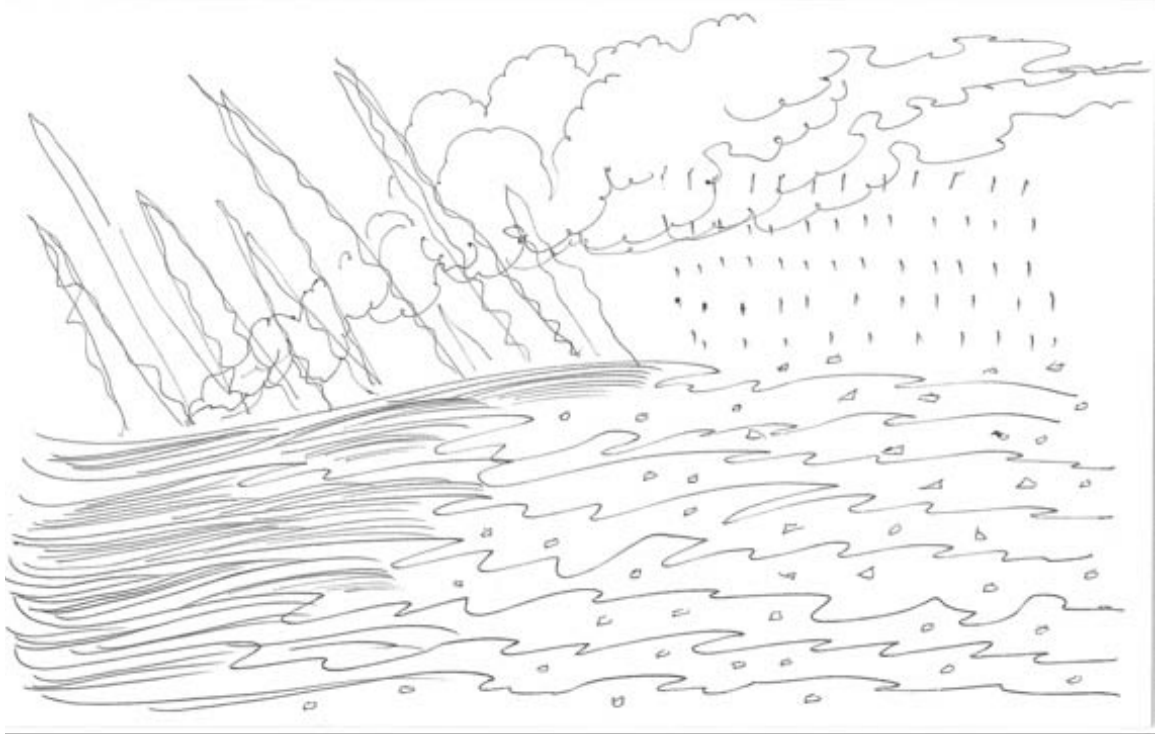


Figure 7B. Participant #21 last drawing

Participants whose ability improved.

There were 14 participants who reported improvement in their ability to use drawing for self-expression (participant numbers 3, 4, 5, 7, 10, 15, 17, 19, 22, 23, 24, 25, 28, 30).

Last drawings compared to first drawings reflected a range of changes in many areas. These included last cards that were more focused on a central condensed image to those who used more of the page in a looser less definite manner. Similarly, there were line quality changes from darker and more definite to line quality that became lighter and more sketchy. These individual differences reflect the idiosyncratic nature of drawing for self-expression. Only two participants (15, 28) in this category made very similar first and last drawings.

First card written themes include comments on the drawing process, feelings, and focus on external influences. Last cards also reflected similar themes in these categories. Added to these, two other primary themes emerged from the writing on the last cards of participants in this group; ending and hopefulness. There were two participants who rated themselves as a 1 on ability to use drawing for self-expression, one of these reported improvement. This participant's writing reflects expressive improvement though not in the above stated themes. He wrote, "Social science voyeur without proper ethics" which maybe a criticism of the study on his first card, and "... voices from the other side of the world" a more expanded view on his last card. Examples of participants with improved ability are quoted in Table 16.

Table 16

Back of the Card Quotes from Those Whose Ability Improved

Participant #	First Card	Last Card
3	morning coffee [external influence]	leftover Easter egg [external influence, ending]
4	started with one...line [process]	process...attractive to me [process, hopeful]
5	trying to fill the card [process]	went back to symmetrical [process, ending]
10	feeling overwhelmed [feeling]	calling forth warmth and gardening [feeling, hopeful]
17	repetition of circles [process]	make a brief stop here on ...journey [process, ending]



Figure 8A. Participant #3 first drawing



Figure 8B. Participant #3 last drawing

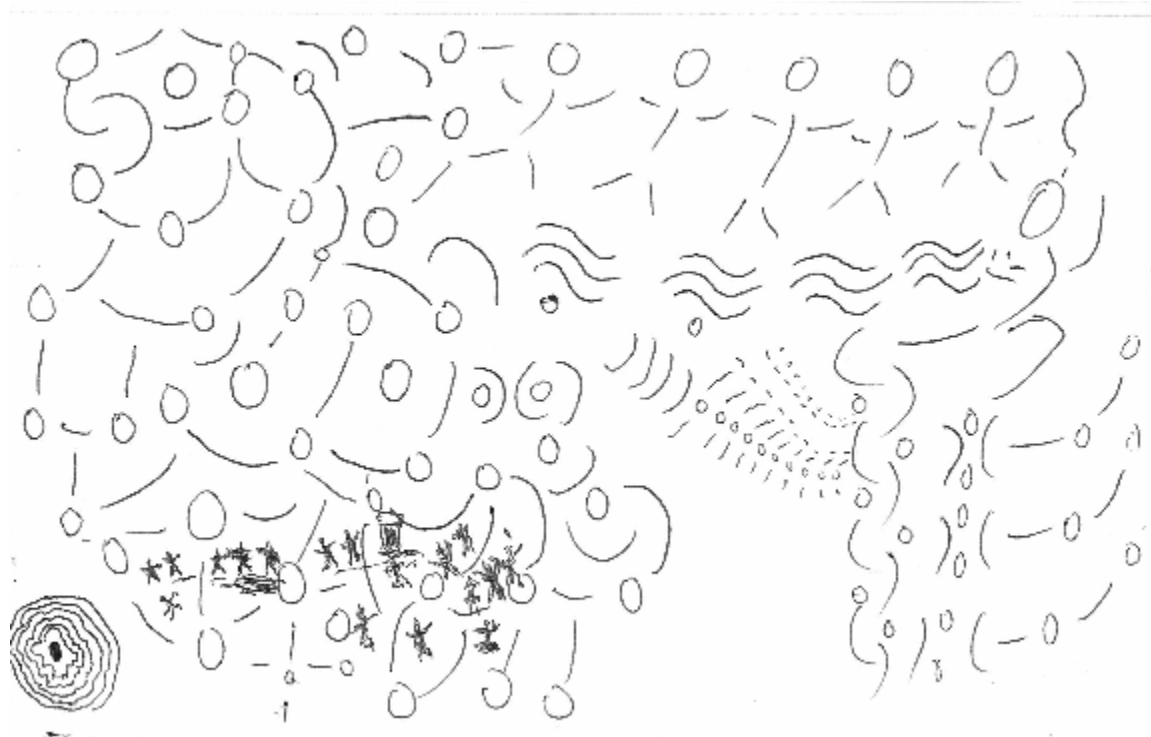


Figure 9A. Participant #5 first drawing

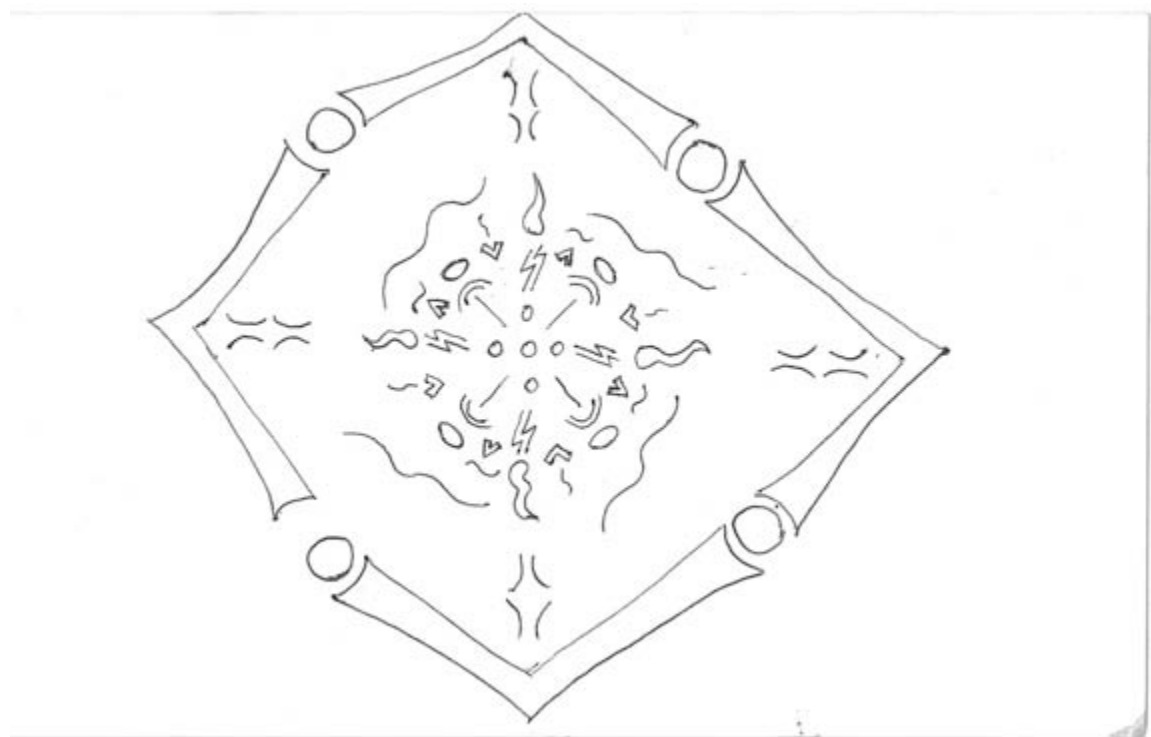


Figure 9B. Participant #5 last drawing

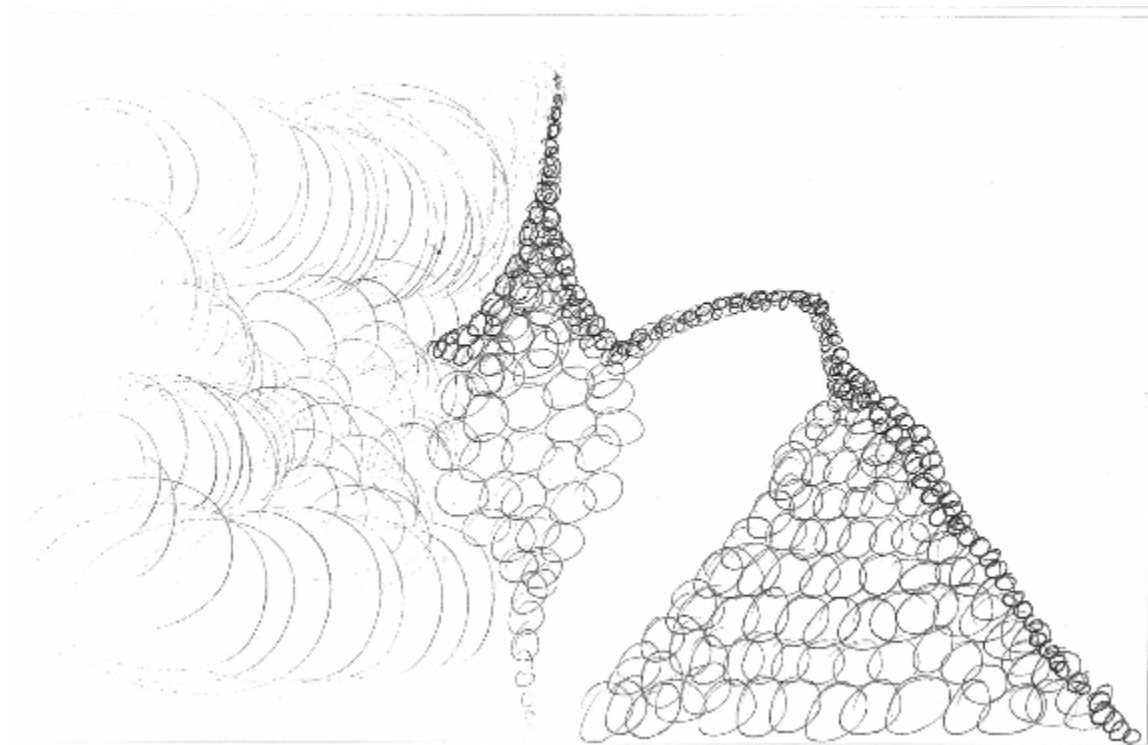


Figure 10A. Participant #17 first drawing



Figure 10B. Participant #17 last drawing

Participants whose ability declined.

Four participants reported a decline in the ability to use of drawing for self-expression. Last drawings compared to first drawings by all of these participants (8, 9, 11, 29) reflected a decline in drawing investment. Last drawings included less of the page, less variety in line, and less detail. Similarly there was less writing on the back of the last cards. A comparison of written themes (back of cards) of these participants can be summarized as the first card about thoughts/ feelings, and the last card as about more concrete reality. Quotes that reflect this shift from thoughts and feelings to more concrete reality are as follows.

Table 17

Back of the Card Quotes From Those Whose Ability Declined

Participant #	First Card	Last Card
8	conflicting thoughts [feeling]	hand healing still hurts [feeling, toward hand]
9	trampled again gone unseen [feeling]	my looseness looks like this [feeling, toward self]
11	wishful thinking [feeling]	staff meeting [external influence, real circumstance]
29	ethereal...influencing life [feeling]	Earth [external influence, solid sphere]

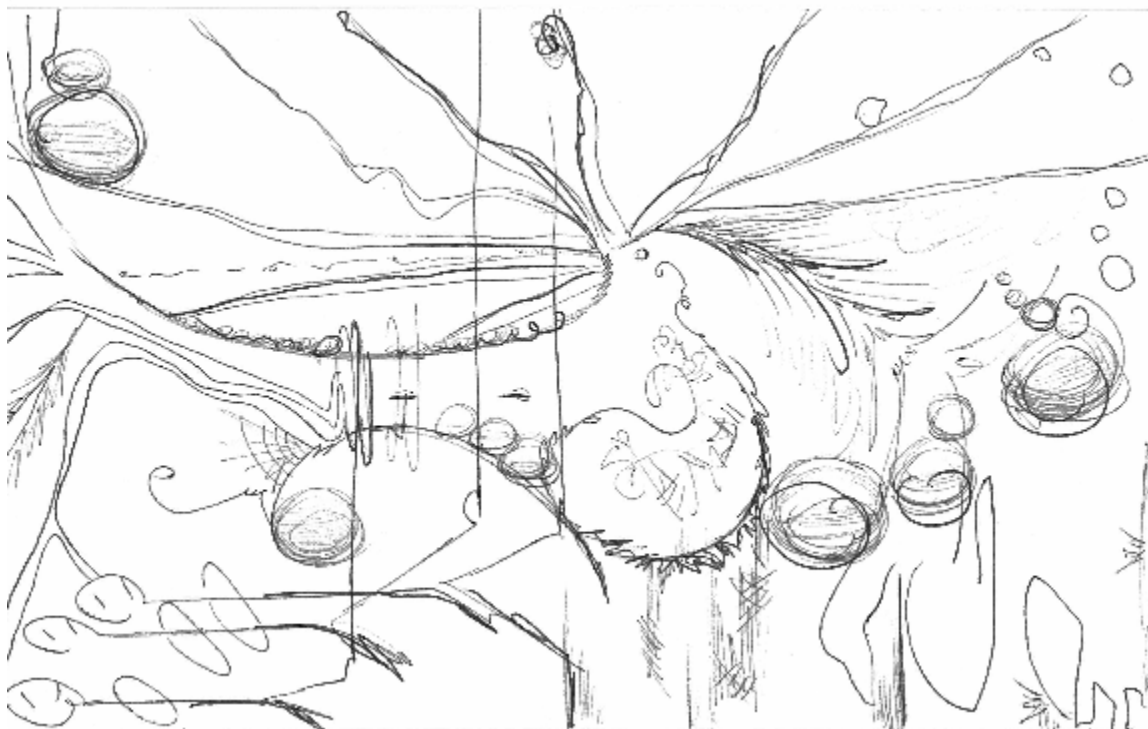


Figure 11A. Participant #9 first drawing

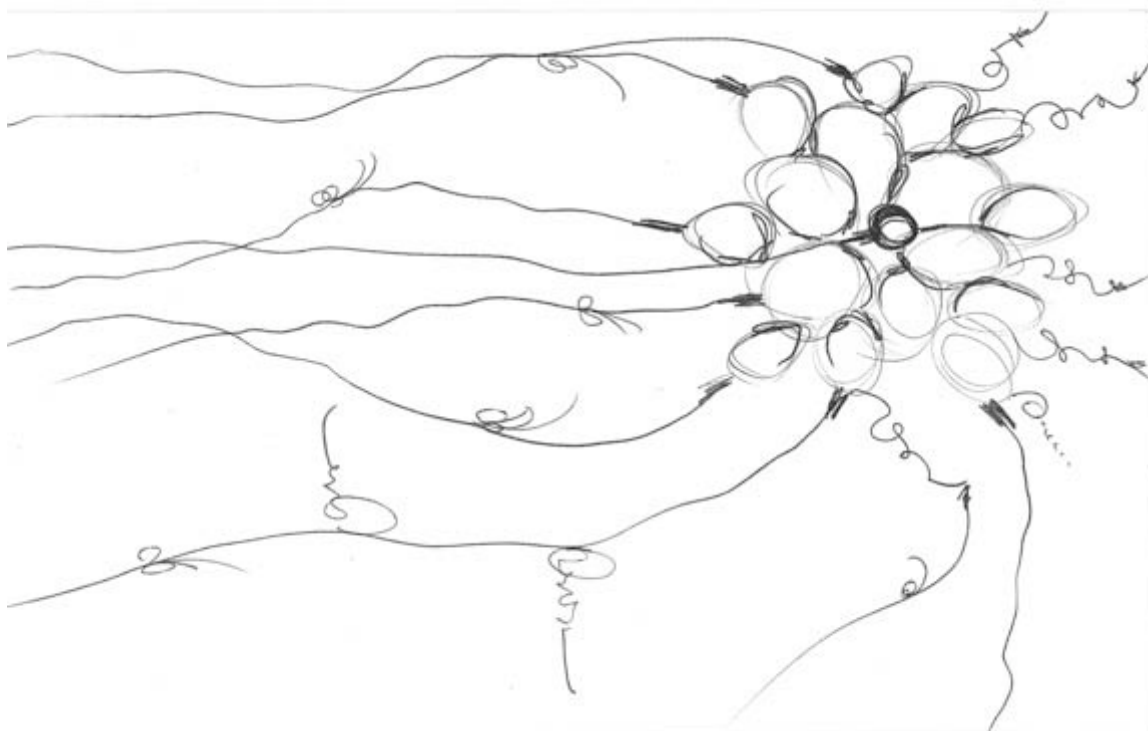


Figure 11B. Participant #9 last drawing

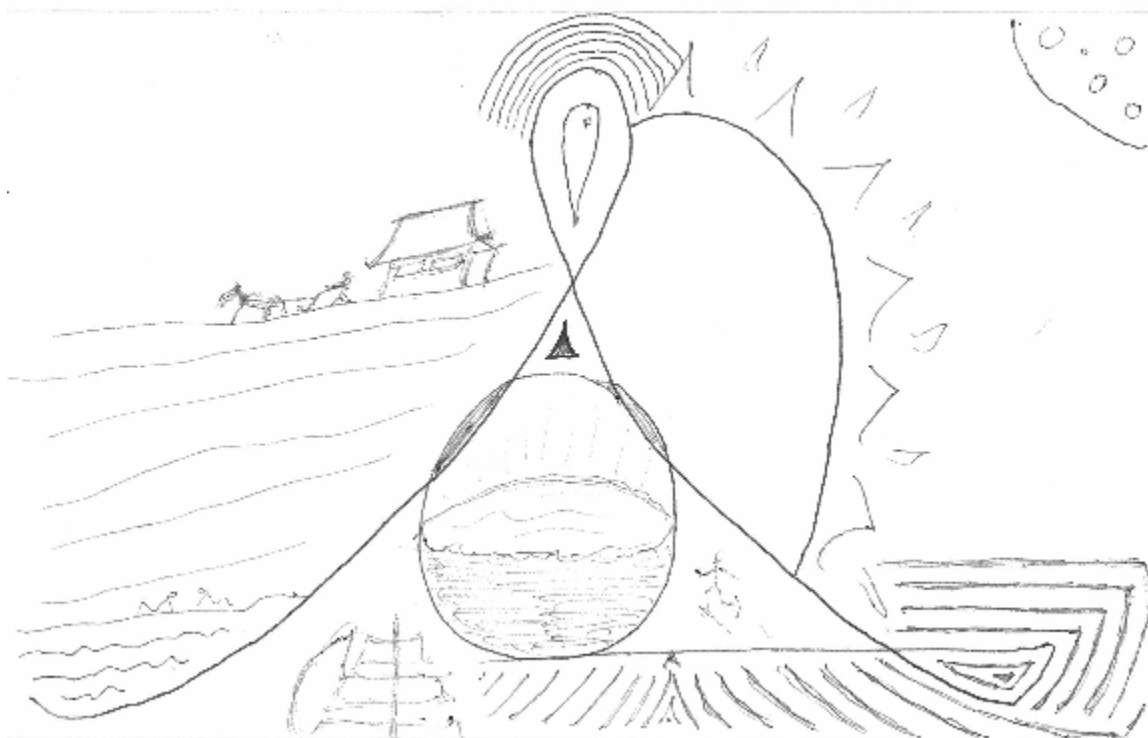


Figure 12A. Participant #29 first drawing

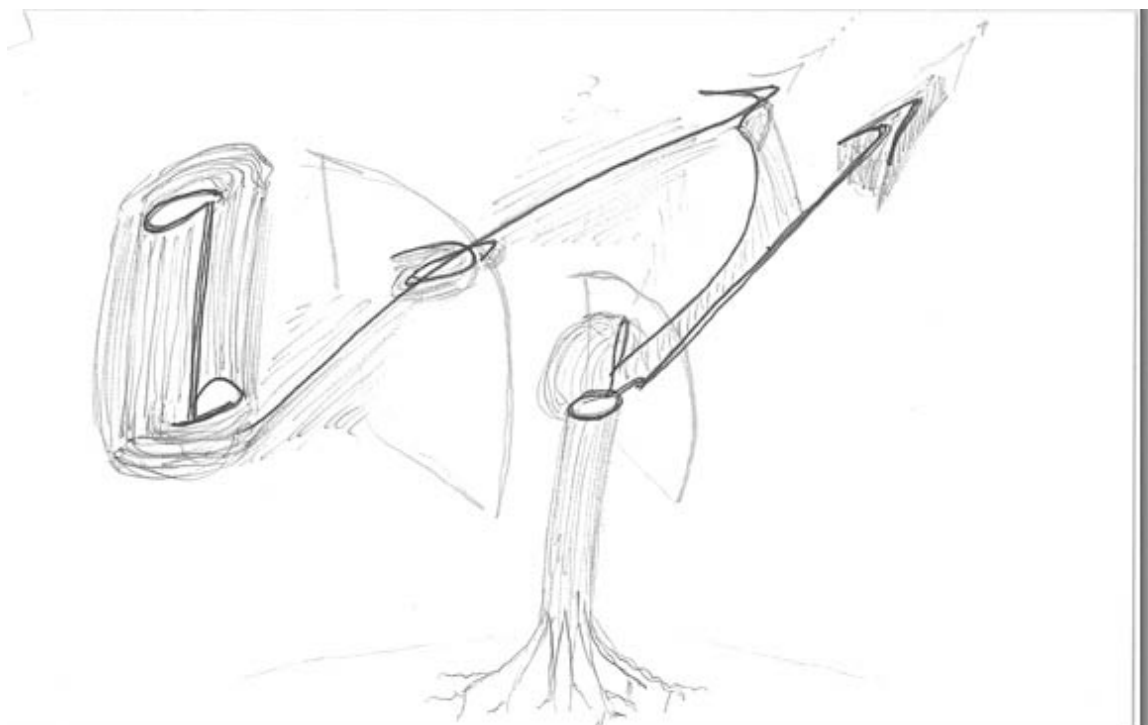


Figure 12B. Participant #29 last drawing

Results Summary

In summary, 30 normally functioning adult participants from the researcher's social and professional network completed the 10 week drawing study. Likert scale ratings were used in both pre and post intervention questionnaires to gather data about the participant's experiences. The post- intervention questionnaire results indicated a significant change in perceived ability to use drawing for self-expression ($p = 0.012$). Other post intervention questions asked participants about aspects of the study design including study elements, drawing suggestions, advantages and disadvantages, and deviations from study design. Results from the post intervention questionnaires indicated that the most helpful study aspects were the small size of the drawing card, the suggestion that drawing is a means of self expression, and that enjoyment/fun and calming were the most important benefits gained. Written results about deviations from study directions emphasized participants' difficulty with drawing at the same time each week, and lesser, but a still significant difficulty with drawing in the same place each week. Participants were also asked about the influence of knowing the researcher. Answers to this question indicated that some participants were influenced in choosing to participate and complete the study. Also some participants named a difference in comfort level as a response to knowing the researcher.

Drawings and back of the drawing card writings were qualitatively examined for further evidence of participant's ways of using the drawing-study process. It was found that untrained drawers were able to use drawing to express and process life circumstances. First and last drawing cards were examined within three categories of post intervention results in reported ability to use drawing for self expression. These

categories were improved, stayed the same, and declined in ability. First and last drawings reflected some evidence with these categories.

CHAPTER FIVE

Discussion

Research about the use of drawing for normally functioning individuals is limited. Understanding the self-expressive advantages, and ways to support drawing for non-clinical populations has some possibility of enhancing non linear creative thinking within contemporary culture. Though an understanding of how normally functioning individuals draw was beyond the scope of this study, the results indicated that participants, including inexperienced drawers, used drawing to emotionally process life circumstances. The key to reported ability seems to be whether individuals value this natural form of expression that begins in childhood. Though there were idiosyncratic ways of using the study-drawing task, individuals tended toward using drawing to express personal feelings and circumstances. Writing on the back of the cards gave evidence of the drawing experience and content. Some participants showed cognitive and emotional sophistication in their writing and a more primitive lack of drawing skill. These individuals still used the drawing task in an expressive manner to process feelings, though some put less value on their drawings. More trained drawers were also sometimes inhibited due to preset ideas of how drawings should look. Examples of participants with art experience that felt apprehension about drawing include, participant #12 who wrote “Its fun to express whatever comes to mind –but there always seems to be self criticism,” and participant #19 who wrote, “I always feel a little apprehensive before starting that I would not like my drawing.”

Study Participant Quotes that Exemplify Benefits Reported in the Literature

Many of the study participants’ quotes reflected the various benefits of drawing

that have been explained and studied within the contemporary art therapy literature. For the non clinical population these include: pleasure (Allen 1995, Csikszentmihaly 1990), restoring attention (Csikszentmihaly 1990), metaverbal communication (Moon 2008), self-healing (Jones, 2006), decrease stress (Curl 2008; Mercer, Warson & Zaho 2010), materializing responses to real or imagined subjects (Enstice & Peters 2003), resolving inner or unconscious material/conflict (McNiff 2004, Chodorow 1997), finding life direction Waterman (2011), and mood elevation and/or repair (Pizarro 2004; Petrillo & Winner 2005; Bell & Robbins 2007; Mercer, Warson & Zhao 2010; Drake, Coleman & Winner 2011).

Post intervention question 4 asked participants about the advantages of making the small series of drawings. The two highest ratings were enjoyment/fun and calming. Participant example quotes of experiencing pleasure included; participant #5 “my self expression flows out pretty easily, I had a lot of fun,” and participant #11 “... does it make me feel good the answer is yes!” Participant example quotes that reflect the calming stress reductive effect of the drawing process included; participant #3 “Very relaxing” and participant #21, “I found the task of undirected drawing to be relaxing.” Participant responses indicated that enjoyment and pleasure were the most important advantages of the study. These responses coincide with the concepts of positive psychology which according to Compton (2005) emphasize well-being by means of positive emotional states (p.11). In this way participants’ senses of pleasure could help promote overall well being. Authors and researchers Reich, Zautra, & Hall (2010) document the connection between the experience of happiness and adult resiliency to life stressors. They explained that their research supports past research “ ... in demonstrating

that positive emotions may function in the service of well being by not only interrupting the ongoing experience of daily stress but also averting delays in adaptation to subsequent stressors“ (p.88). Because participants identified enjoyment and calming as the most significant positive experiences of the drawing task employed, my study supports the use of drawing as an avenue toward well-being.

Other benefits within the literature were also reflected in participant quotes. Though participant quotes are too numerous to list in their entirety, examples include: participant #10, “It focused me more in a way that was both more fun and less judgmental” (Restoring Attention, Csikszentmihaly 1990); participant #1 “use drawing to explain clarify... not able to put thoughts on paper” (metaverbal communication, Moon 2008); participant #25 card 1, “... sat down to draw my old dog” (materialize responses, Enstice & Peters 2003); participant #20 card 2 “reminded me of a compass. Wondering if it relates to my energy and focus on with direction to go” (finding life direction, Waterman 2011); and participant #19 “I loved the unexpected results that came out of doing a series” (Resolve inner or unconscious material or conflict, Chodorow 1997; McNiff 2004). An example of recent art therapy literature about drawing as a means of mood repair was clearly stated by participant #24 “Several news events happened during my drawing time (Jan. 8 shooting) –having the drawing to do really helped me process them- or, rather have a break that was calm and hopeful. Drawing feels hopeful.”

Though not a focus of this study many study participants wrote about experiences that are present in the trauma recovery literature. Specifically art therapists and somatic experiencing practitioners have developed techniques that study participants used without

direction. Hager (2011) emphasized that even normally functioning individuals have had traumatic experiences and that the ongoing stress in a contemporary lifestyle pre-disposes individuals to trauma responses. Beyond everyday stress, world events can cause people added stress. During this study there were two major events that some participants named on the back of the drawing cards; a Tsunami in Japan, and a random shooting spree in an American city in which many were injured or killed. Three participants lived in that city at the time of the shootings. Also unrelated to the shootings, two participants wrote that a friend had died. Because these stressful situations were named on the backs of the drawing cards, it is inferred that these participants were dealing with this in their drawing. Trauma recovery techniques in the literature that participants named were; accessing emotions and unconscious material (Kloer 2005, 2007), combining fantasy and cognitive narrative (Appleton 2001, Chapman 2001, Creek 2007), Linear/ nonlinear integration (Gantt, & Tinnin 2007, Hudson 2005, Kaiser, Tripp & Talwar 2007, Kloer 2007, Lusebrink 2004, Mc Namee 2003, Perrier 2007, Pugh 2007, Shapiro & Maxfield 2002, Talwar 2007), regressed drawing (Cohen & Cox 1991), and natural restorative ability within the body (Hager 2011, Levine 1997).

Many participant quotes refer to accessing emotions and unconscious material through a mind/body connection made through the drawing hand. Examples include, participant #10, "I just drew whatever came out of the brain/pen" and participant # 20, "I did not have the intention of depicting my feelings...feelings did emerge but it was not through an attempt." Other participant experiences that reflect trauma literature include: participant #26, "So space ships leaving the earth is my answer. Run away from all the stuff I'm hating" (Combining Fantasy and Cognitive Narrative, Creek 2007, Chapman

2001, Appleton 2001); participant #29 card one- “left and right are separate but trying to connect” (Linear/ Nonlinear Integration, Shapiro & Maxfield 2002, Gantt & Tinnin 2007, McNamee 2003 2004, Lusebrink 2004, Kaiser, Tripp & Talwar 2007, Talwar 2007, Hudson 2007, Kloer 2005, Pugh 2007 Perrier 2007); and participant #8 card two- “I tried to draw people like I used to when I was 11 or 12” (Regressed Drawings by Adults, Cohen & Cox 1991). Levine and Hager’s focus on the natural restorative abilities within the body were repeatedly evident in participant quotes. These included, participant #7, “It seems to take me into a zoned out state that is very fluid and relaxing,” participant #12, “doodling...allowed for emotional release,” and participant #16 “the whole drawing was very focusing and quieting for my nervous system.”

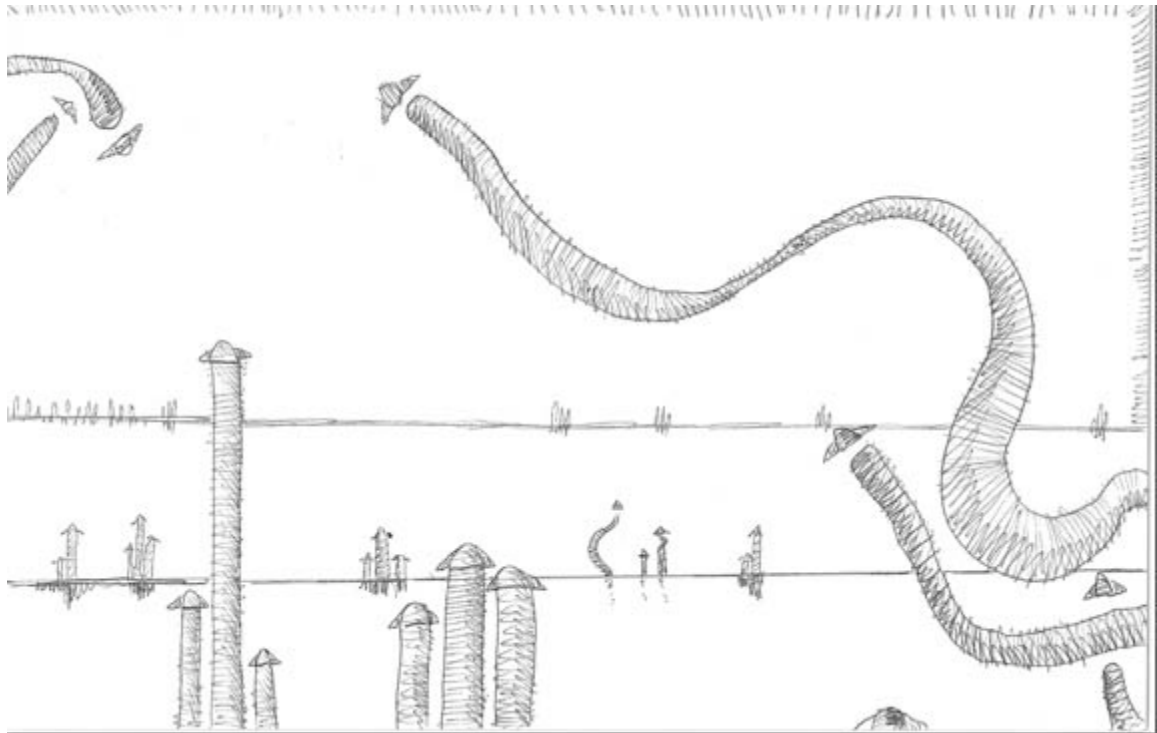


Figure 13. Participant #26 “So space ships leaving the earth are my answer. Run away from all the stuff I’m hating.”

As Pertillo and Winner (2005) found in their study, individual participants used the process of drawing in different ways according to their personal needs and coping styles. Participants in this study also used the drawing task in their own ways for personal expression and self-healing. Levine (2010) emphasized that individuals must discharge energy that has been bound by stressful circumstances to restore equilibrium and balance (p. 93). This study as well as previous research support drawing as a way to express and calm the mind and body.

Study limitations.

The results of this study cannot be generalized to the wider non-clinical population due to the small sample size ($N = 30$). The study population was limited because participants were invited from the researcher's social and professional network. Therefore, the sample was likely biased toward similarities with the researcher. One example is that many of those who chose to participate had some comfort with drawing for personal expression unlike some in the general population of adults who may not have drawn since childhood. Another example is that most of the participating study participants were educated, professional women. All participants except one were or had been college educated and or professionals. Many in this particular group were busy with life tasks including work and family. The short small weekly drawing task for the study was designed for this type of population, and a significant number of participants reported being able to use the weekly drawing task for their benefit. However the small size of the cards and pen use were inhibiting to some who wanted looser media, color and/or larger drawing surfaces. These individuals could likely benefit from a consultation that encouraged freer expression through larger size, softer media and color.

Results showed that overall there was a significant positive change among participants in ability to use drawing for self-expression. However, 40% of the participants reported no change, and half of these rated themselves at the top of the ability scale on the pre-intervention questionnaire so that no positive change could be rated. This might mean that study results did not show the possible improvement of these participants. Others (20%) who rated themselves as having no change may have benefited from suggestions about how to better use drawing to their advantage. Because the goal of the study was for participants to use drawing for self-expression, it is a problem that the study structure had an opposite effect on four participants. The study reinforces the fact that individuals use drawing in idiosyncratic ways for various different benefits, so flexibility with structure is really essential as a response to individual needs. This flexibility was not included in the study design, and further studies on drawing for self expression could benefit from a more flexible study design. Another limitation of the study is that the researcher knew all but three study participants in another context. In this way the interpersonal feelings of the researcher may have influenced both study results and relationships. Though each participant was given an identification number, it often became easy for the researcher to identify individuals through their qualitative data. An advanced art therapy student worked to code qualitative data with the researcher, which was helpful, but may not have prevented researcher bias from creeping in.

Participants also may have been biased in the study due to knowing the researcher and they were asked about this in the post intervention questionnaire. Because the professional population is sometimes busy to the point of inaccessibility and may have little motivation to participate in a drawing study, the fact that knowing the researcher

influenced people to participate and finish the study, allowed some access to this unstudied population. Some participants wrote that their comfort level was compromised due to knowing the researcher. This was an unfortunate side effect of knowing the researcher.

Conclusion

The study design is an addition to the literature because the drawing task was a convenient, portable technique that was possible for employed or retired adults to insert into their weekly routines. The art therapy literature has addressed some of the benefits of drawing for normally functioning students, but has overlooked adults who are employed or retired. The needs of this group have not been previously addressed. Some participants could have benefited more through a consultation or dialogue to generate suggestions for adjustments to the study design when the techniques were frustrating or not helpful for that participant. However, through the study techniques employed, most participants were able to flexibly use drawing in different ways to benefit individual needs including fun, calming, and self-reflection. Many study participant comments spoke of a connection experienced between hand, pen and feelings. This could possibly relate to the body/mind connection that Levine (2010) advocated as the way of needed self-healing in contemporary society. Further research would need to be conducted to more fully understand the relationship between free drawing, a mind/body connection, and self-healing.

Art therapist, Bruce Moon (2008) emphasized the contemporary cultural need for creative self-expression among the general population. He stated, "In modern times, the notion of people being creative has diminished. It is as if creativity is seen as a private

attribute of the artist, entertainer, or scientist” (p. 68). This study was a response to the need for creative nonlinear expression within contemporary American society, and a majority of study participants reported self-expressive advantages.

APPENDIX

29 Everett St., Cambridge, MA 02138

Doctoral Research Informed Consent

You are invited to participate in the research project titled “The Benefits of Making a Small Drawing Series with a Non-Clinical Population of Adults.” The intent of this research study is to understand the experience of study participants who make a small series of drawings.

Your participation will entail making ten ink drawings on 5”x8” index cards. As much as possible, drawings should be made weekly at a regular time and place of your choice. Each drawing can take approximately ten minutes.

In addition

- Former knowledge about drawing is not necessary.
- You are free to choose not to participate in the research and to discontinue your participation in the research at any time.
- Identifying details will be kept confidential by the researcher. Data collected will be coded with a pseudonym, the participant’s identity will never be revealed by the researcher, and only the researcher will have access to the data collected.
- Any and all of your questions will be answered at any time and you are free to consult with anyone (i.e., friend, family) about your decision to participate in the research and/or to discontinue your participation.
- Participation in this research poses minimal risk to the participants. The probability and magnitude of harm or discomfort anticipated in the research are no greater in and of themselves than those ordinarily encountered in daily life.
- If any problem in connection to the research arises, you can contact the researcher, Deborah John at 505-473-1153 and by email at deborahjohn@hotmail.com; or Lesley University sponsoring faculty Dr. Robyn Flaum Cruz at (412) 401-1274 or email rcruz@lesley.edu; or email the chair of the Human Subjects Committee gdiaz@lesley.edu
 - The researcher may present the outcomes of this study for academic purposes (i.e., articles, teaching, conference presentations, supervision etc.)

My agreement to participate has been given of my own free will and that I understand all of the stated above. In addition, I will receive a copy of this consent form.

Participant’s signature

Date

Researcher’s signature

Date

29 Everett St., Cambridge, MA 02138

CONSENT TO USE AND/OR DISPLAY ART

CONSENT BETWEEN: Deborah John and _____
Expressive Arts Therapy Doctoral Student **Artist/Participant's Name**

I, _____, agree to allow Deborah John.
Artist/participant's name **Expressive Arts Therapy Doctoral Student**

to use and/or display and/or photograph my artwork, for the following purpose(s):

- ☐ Reproduction and/or inclusion within the research currently being completed by the expressive arts therapy doctoral student.
- ☐ Reproduction and/or presentation at a professional conference.
- ☐ Reproduction, presentation, and/or inclusion within academic assignments including but not limited to a doctoral work, currently being completed by the expressive arts therapy doctoral student.

It is my understanding that neither my name, nor any identifying information will be revealed in any presentation or display of my artwork, unless waived below.

☐ I DO ☐ I DO NOT wish to remain anonymous.

This consent to use or display my artwork may be revoked by me at any time. I also understand I'll receive a copy of this consent form for my personal records.

Signed _____ Date _____

I, Deborah John, agree to the following conditions in connection with the use of artwork:
Expressive Arts Therapy Doctoral Student

I agree to keep your artwork safe, whether an original or reproduction, to the best of my ability and to notify you immediately of any loss or damage while your art is in my possession. I agree to return your artwork immediately if you decide to withdraw your consent at any time. I agree to safeguard your confidentiality.

Signed Deborah John Date October 3, 2010
Expressive Arts Therapy Doctoral Student

- If any problem in connection to the research arises, you can contact the researcher, Deborah John at 505-473-1153 and by email at deborahjohn@hotmail.com; or Lesley University sponsoring faculty Dr. Robyn Flaum Cruz at (412) 401-1274 or email rcruz@lesley.edu; or email the chair of the Human Subjects Committee gdiaz@lesley.edu

Drawing Packet

Page 1

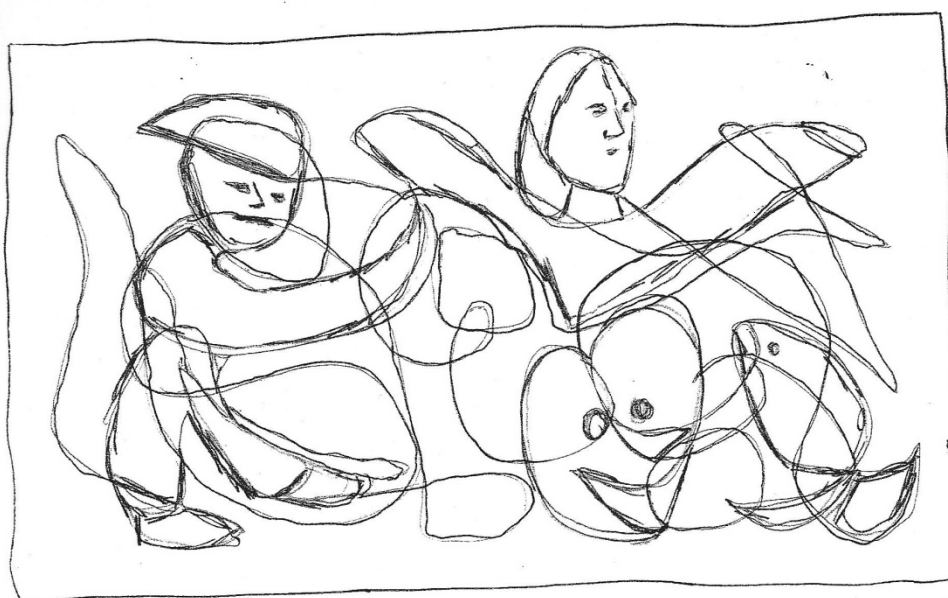
Purpose of the study: Drawing can be a way to express and process thoughts and feelings. In this study participants will establish a regular drawing practice as a means of self-expression. The study is designed to fit into the busy pace of contemporary life. Drawing for ten minutes at a time on small cards is an accessible way to include drawing into one's lifestyle. The purpose of this study is to determine the possible benefits of integrating this drawing practice into each participant's life. A questionnaire will give participants the opportunity to document their experience of making a small drawing series.

Directions: Please follow the directions as much as possible. If some aspect(s) of the directions make it difficult for you to continue in the study, change them in a way to make it possible for you to continue, and document the changes on your final questionnaire.

1. As much as possible find a regular weekly time and place to make each of the ten consecutive drawings. The drawing cards are numbered 1-10.
2. Use the pen on the cards to make drawings. Take about ten minutes to do each drawing.
3. Each drawing card has a lined and blank side. Draw on the blank side, and add any words connected with your drawing experience on the lined side.
4. Suggestions for drawing:

Drawing is a means of self-expression, so any way you draw is expressive. One way you can think about drawing for self-expression is that it is like doodling.

A technique that could be helpful is to find pictures in a scribble drawing. See example below.



Page 2

Please complete the consent to participate form, the artwork consent form, and the information below, and send them to the researcher in the enclosed envelope or give them directly to the researcher. There are duplicate consent forms so you can keep a copy for yourself.

Information About Participant: (all this information will be kept confidential)

Name_____

Address_____

Phone number_____

Email address_____

Gender (circle) M or F, Age _____

Occupation_____ Retired_____ Homemaker_____

On a scale from 1 to 5, Please rate:

Your perceived ability to use drawing for self-expression (1= no ability to use drawing for self expression and 5= easily able to use drawing for self expression) _____

Comments about this rating:

Your previous drawing experience (1=no drawing experience since childhood and 5=have taken drawing classes and draw regularly)_____

Comments about this rating:

Your opinion about the statement, 'The best drawings are like photographs and realistically portray subjects.' (1=totally true and 5= totally false)_____

Comments about this rating:

Please feel free to contact the researcher with any questions. I can be reached by phone at 505-473-1153, or email deborahjohn@hotmail.com

Page 3

Completing the study:

After you have completed ten drawings, please review your drawings in consecutive order. Then fill out the final questionnaire and send the drawings and the completed questionnaire in the return envelope or give directly to the researcher.

Final Questionnaire

Rate the following items on a scale from 1 to 5:

Your perceived ability to use drawing for self-expression (1=no ability to use drawing for self expression and 5= easily able to use drawing for self expression)_____

Comments about this rating:

Rate these elements of the study (1=extreme disadvantage and 5= extremely helpful)

Card size_____ 2 sided cards_____ Regular time_____ Regular place_____ Pen use_____

Comments about these ratings:

Rate these suggestions (1=not helpful and 5= extremely helpful)

Suggestion that drawing is like doodling_____

Scribble drawing example_____

Suggestion that drawing can be used for self-expression_____

Comments about these ratings:

Page 4

Rate these possible advantages from the pilot study (1=did not experience and 5=experienced as extremely helpful)

Expressing/releasing feelings_____

Enjoyment/fun_____

More attentive_____

Calming_____

Self-reflective_____

Comments about these ratings:

Rate these possible disadvantages from the pilot study (1= experienced as an extreme disadvantage and 5= did not experience as a disadvantage)

Challenging due to a verbal thinking focus_____

Difficult to accurately depict feelings_____

Comments about these ratings:

If you know the researcher, what influence did this have on your participation?

In what ways (if any) did you deviate from the study directions?

Is there any thing else that you would like to share with the researcher to further her understanding of your experience of participating in this study?

Check here if you would like your drawings sent back to you. _____

Check here if you would like to receive a summary of the study results. _____

Thank-you for participating in this study.

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