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Art Therapy with Families Where Child Abuse Has Occurred

Silvia Casabianca

A Thesis

in

The Department

of

Art Therapy

Presented in Partial Fulfillment of the Requirements for the Master's Degree in Art Therapy at Concordia University Montreal, Quebec, Canada

September 1992

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ABSTRACT

Art Therapy with Families Where Child Abuse Has Occurred

Silvia Casabianca

Art Therapy was conducted with families whose family systems were dysfunctional. Ten families were seen in a clinic facility and assessed through art. Five of these families were referred because of abnormal behavior displayed by children at school, which made their teachers suspect maltreatment at home. The other cases were attending the clinic because of violence in the family, and were through the regular clinic channels.

Commonalities were looked for in the art process, the art products, the therapeutic relationship, family structure and family interactions. Families were seen in different, unstructured one and one-half hour sessions. Family members were asked to draw. Their free drawings, self-portraits and family portraits were reviewed. Five of the cases are described in detail.

Physical maltreatment may be seen as rooted in cultural and parental attitudes about child-rearing practices. In such cases, the socioeconomic condition of the families seemed directly related to the occurrence of child neglect, scapegoating and abuse. On the other hand, multiple stressors that lead to severe dysfunction, family disruption, and a child's transient way of life seem to form a complex in which maltreatment "flourishes". These concurrent life characteristics make it difficult to ascribe commonalities observed in the drawings of the different families solely to maltreatment. Most adult drawings were infantile, while children's drawings appeared to be appropriate to their developmental stages. Themes were usually simple and concrete in both adult and children's art tasks. None of the children included themselves in the family portraits. Several children drew sun and moon in the same composition in what could be considered symbolization of ambivalent feelings towards caretakers. Identification with aggressors was also portrayed. Art tasks, particularly with children, seemed to serve as an expressive outlet for repressed feelings.

A larger sample of families would be needed to confirm a relation between the observed commonalities and child abuse.

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And last but never least, I want to express my immense gratitude to Phillippa and Dan Baran, who really understood what it means for a Latin merican to deal with a different language and a different culture. To them, for all their support, friendship and assistance, I want to dedicate this work.

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Chapter I

Foreword

Initially, my selection of a thesis topic was guided by questions related to the introduction of Art Therapy to my country, Colombia. What problems are encountered when introducing the theory and practice of Art Therapy into a developing society? How do differences in North American and South American cultures affect the application of Art Therapy? Which approaches are most pertinent and valuable to Latin America? What is the objective of introducing Art Therapy as a new discipline?

Although my work evolved into a proposal and thesis on families in which child abuse has occurred, I never lost sight of my original interests. Throughout, I was aware that this study of families and child abuse might yield insights into the process of bringing Art Therapy to Colombia.

My background as a medical doctor involved working with families and communities. As a result, I view the individual as a bio-psycho-social entity. As an Art Therapist, I am centered on the psychological aspects of the individual. My perspective includes reference to the social factors that relate to mental health.

Introducing Art Therapy to my city has been a considerable challenge because in Cartagena it is a new discipline and a new tool for evaluating and

treating psychological disturbances. The challenge was compounded by the fact that there is no precedent, in Colombia, for the use of art expression in the assessment and treatment of child abuse.

Because I am a novice in Art Therapy and had previous experience with child abuse only as a physician, this study has generated more questions than answers, and has encouraged me to continue using Art Therapy in clinical research.

Cultural issues proved to be very important. Very often, I found myself trying to translate the culture in which I worked into what I understand about the culture in which the work will be read and evaluated. A further complication arose from the fact that both of these cultures differ from the culture into which I was born and in which I grew up.

Chapter II

Introduction

"Art is a powerful tool, one which, like a surgeon's, must be used with care and skill if it is to penetrate safely beneath the surface."

Judith Rubin (1984b, p. 299).

From the outset, I knew that the disciplining of children by physical means is commonly accepted in most Third World countries. Such a practice can serve as a prelude to an escalating pattern of violence that often ends in child abuse. Furthermore, socioeconomic conditions may mean that a large percentage of the population is unable to satisfy basic needs. Neglect can thus be considered a very common form of domestic violence. Not enough has been done to improve parenting skills or deter the use of physical punishment as a common child-rearing practice. Fortunately, awareness of the consequences of family violence has increased. In the last two decades some progress has been made in assisting the victims of severe abuse.

Many countries have produced a wealth of data on the psychological implications of child abuse. In Colombia, there has been little progress in terms of either legal measures or education about the consequences of family violence.

Because long-lasting psychological effects can be prevented if abusive patterns of interaction in the family are recognized early, research on assessment methods and useful therapeutic interventions is of prime importance.

To collect data for this thesis, I arranged to have access to the child physical abuse cases arriving at the clinics of a state-funded agency for the welfare of families. Several months later the first case was referred to me and I started to attend one of the clinics every Wednesday afternoon. Because no new cases were admitted, I talked to the Director of a Children's Home (HI), a pre-school facility located in the same building and associated with the same agency. The Director agreed to refer to me the families in which maltreatment was suspected because of childrens' abnormal behavior. Every person involved with this project was excited about the idea of Art Therapy as a new instrument for assessment and treatment.

In a seven month period from May 1991 to Dec 1991, I assessed ten families in the clinic. Five families were referred to me by the HI, four arrived through the regular channels of the clinic and the last one was referred by a teacher triend. Art Therapy with five families will be described in detail. I will refer briefly to significant issues arising in the other five families.

Limitations are described in Chapter X, Conclusions. Some of the limitations led to modifications of the thesis project. Some modifications were introduced after the first family was seen. Other modifications were made because of insights derived from my experience as a therapist and from my experience teaching Family Health at a Colombian university. These perspectives alerted me to considerations I had overlooked when I wrote the proposal, thereby requiring redesign of the study.

Chapter III

Rationale for this Study

One of the many advantages of Art Therapy is its provision of a way to register emotional disturbances. Family members are unlikely to engage in spontaneous discussion of domestic violence. Often, the existence of family violence constitutes the family secret. Art Therapy provides the members of a family with a safe space in which they can recreate the conflicts and the traumas (and thus vent the secret) without direct confrontation and while their ego defenses are respected. Such a safe space may be necessary until family members gain the strength needed to cope with ambivalent feelings.

The thesis was directed at answering the following question: How can Art Therapy assessment contribute to the understanding of the dynamics and structure of families in which children have been victims of physical abuse?

An adequate response to the problem of child abuse requires diagnostic and expressive tools. (Malchiodi, 1990; Manning, 1987). The study attempted to determine whether there exist recognizable and distinctive structural and dynamic qualities common to these families, and how these qualities or patterns are reflected or projected into the art process, the art product and the therapeutic relationship.

An objective of this study was to increase my experience and knowledge of physical abuse and its impact on the family system. This observational study will serve as the initial step for further research in the same field.

Many arguments have been made in support of the utility of Art Therapy in preventing and treating child abuse.

1. Emotional indicators and dynamic processes related to trauma contained in children's drawings suggest that physical child abuse is not psychologically harmless. Art products may yield information not available through verbal means, leading to opportune therapeutic interventions (Ulman & Dachinger, 1975).

Art Therapy, by facilitating access to traumatic images and memories, can be an appropriate tool in the assessment of the psychological impact of a trauma. Through using the symbol and the metaphor, the compulsion to repeat (Miller, 1981), to reenact the abusive situation whether as a victim or by identification with the aggressor, will be manifested in the art making. The introduction of a third element, art, helps to establish a distance between the actual and the recreated violence, lessening the trauma implicit in reenacting and diminishing psychic pain and damage (Johnson, 1987). As stated by Johnson (1987, p.9), "In Art Therapy dissociation occurs between the self and the content of the picture, but without impairment to the patient's state of cognition." This imparts a distinct advantage to the use of Art Therapy when dealing with abuse. For t'e abused child, art can provide a safe way to communicate or express his or her feelings (Kramer, 1971; Naumburg, 1966). Stemberg (1977, p. 99) points out that "creative expression fosters opportunities for re-learning acceptable behavior

and communication. Deficits, fears and self-destroying patterns may be expressed through the healing of specific media for healthy personality development."

- 2. Adult family members' drawings may reveal unresolved conflicts from the past as well as rigid maladaptive patterns of interaction that contribute to or explain their behavior towards children.
- 3. If there are common patterns of behavior or transaction or family structure among families where abuse occurs, it is likely that the commonalities would be reflected in the art products and processes, in the way the families interact among themselves, as well as in the manner in which the families interact with the therapist in the therapeutic situation.

By applying the Human Figure Drawing Test to almost 2.000 children, Koppitz (1974) found commonalities in the drawings, correlations between evolutive and emotional indicators that generated items useful in clinical applications. Malchiodi (1990) and Manning (1987) found common characteristics in art productions as well as in what Malchiodi calls "ar' behavior" in child victims of abuse. In ten years of work with children of battered women, Malchiodi found certain commonalities among these children, including visual metaphors of monsters and different expressions of pain, anger, fear or loneliness. She also found that the need for nurturance manifests itself in art behavior: "They seem to require an excessive amount of materials to create art expressions or they need to hoard materials excessively. They may also want to take quantities of materials at the end of the session..." (Malchiodi, 1990, p. 26).

4. Based on the existence of those commonalities, assessment methods can be designed to evaluate maltreatment even in those cases where the family denies its existence. Therefore Art Therapy can be a useful tool in assessing the harm caused by physical abuse, in uncovering the existence of abuse, as well as in assessing and understanding family functioning and individual intrapsychic processes.

5. Art Therapy sessions can provide a holding environment for these families, one in which therapists respond empathically and gratify family members through symbolic feeding (materials and space). Therapists can help clarify diffuse boundaries and open rigid ones, thereby contributing to the undoing of rigid triads and therefore restructuring the family and improving functioning (Minuchin, 1974).

Bibliographic precedents of the use and value of art expression in crisis interventions and child abuse are described by Malchiodi in her book <u>Breaking</u> the <u>Silence</u>: Art Therapy with Children from Violent Homes.

As Wolfe (1987, p. 75) points out, child abuse must be addressed because "...violence in one's family background is the most commonly cited predictor of future violent behavior on the part of the individual", and "the abused child...is more prone to develop psychological disorders or adjustment problems due to the powerful influence of negative early experiences that set the course for adaptational failure" (1987, p. 100).

Chapter IV

Theoretical Framework

"Art is an antidote for violence." Rollo May (1985, p. 215).

I will center this study on the issue of child physical abuse although I am aware that this phenomenon does not occur in isolation, but is rather a complex that usually involves emotional and/or sexual abuse, and affects not only the child but also different members of the family. The thesis makes reference to two examples of the latter: the sexual abuse of Rose and Grace was either known or suspected; Willy's mother was battered by Willy's stepfather.

Physical abuse is part of a cycle in which the whole family is compromised. Several approaches to deal with the issue have evolved, especially in the past three decades, after large-scale surveys in North America provided better documentation of the extent and serious implications of the problem.

I agree with Wolfe, who suggests that in order to understand parental abusive behavior, one must consider the context in which it occurs, parental background and societal child-rearing practices (Wolfe, 1987, p. 69).

I wanted to conduct a study that yielded more than anecdotal information and that embraced more than a psychodynamic interpretation. That is why I considered it desirable to use several frames of reference, very much guided by what seemed to work in practice. The prevailing conceptual model among health

and social professionals is linear. But because family violence is, by definition, an interactional event, a strictly linear approach centered on the individual adopts a very limited target. Systemic theories of the family seem an appropriate conceptual framework. As indicated by Levant (1984, p. 72), "single theories are often insufficient to the task of understanding the families one is working with."

Minuchin's (1974) structural model offers a framework for the study of family structure and transaction, a framework distant from a biological model that considers the individual as the site of pathology. In approaching the family as a sociocultural system in constant transformation (Minuchin, 1974), abuse is not considered to be the result of the abuser's pathology or the child's characteristics. Rather, abuse is viewed from the perspective of overall family functioning.

At the same time, object-relations theory, a psychodynamic approach that considers the need for relatedness as the individual driving force, will be used as the main framework to study the inner worlds of the family members.

I agree with Nichols' observation that "extreme conceptual positions - either psychological or family systems - falsify the essential interactional quality of the self in the system" (Nichols, 1987, p. 188). As stated above, I found myself using a pragmatic approach.

Definitions

For the purposes of this study I will define the family as an active, interrelated system in permanent transformation, constantly being disturbed by and constantly disturbing, the extrafamilial environment and adapting to the

different demands of its developmental stages. The family is a complex, open, structured and organized system that maintains a dynamic equilibrium. It is a primary instance of socialization, the matrix for identity, and undergoes a process of differentiation, growth and adaptation (ICBF, 1989; Minuchin, 1974).

The self can also be conceptualized in systemic epistemology as an open system that develops and maintains identity through social relations (Nichols, 1987).

Physical abuse will be defined as physical maltreatment, serious physical neglect, and/or injury not explained by accident, caused by a child's parents or caretakers, that threatens the child's welfare and health in the bio-psycho-social spheres (ICBF, 1989; Federal Standards for Child Abuse and Neglect Prevention and Treatment Programs and Projects, 1978). It refers to more than physical injuries, and includes both acute and chronic significant events that interrupt and may impair a child's ongoing psychological development. Burguess (1979) considers physical punishment and abuse to be extremes of the same continuum.

Theoretical Explanations of Abuse

Explanations of family and social violence range from the psychoanalytic perspective that considers aggressive drives as innate in human beings, to sociological explanations that view violence as the result of frustration.

Storr (1978), speaking from a psychoanalytic perspective, considers that "whenever human beings are held together by ties of love, whether that love is primarily erotic or supportive, aggressive tensions are also inescapable." (p. 1).

He maintains that "violence within the family is not a category apart...it is an exaggeration of aggressive tensions of a normal kind which are to be found in every home. We shall only understand violence if we also understand something about the ordinary aggressive impulses which operate within us all."

From a psychodynamic point of view the family bridges psychic life and social participation.

From the sociological point of view we see the family as an historic institution which depends on social organization and the cultural context. Various factors limit a family's capacity to perform its functions: income level, members' occupations, and accepted and generalized values and norms. Goodenough (1963) explains violence from a sociological point of view:

The natural immediate response to frustration appears to be anger or rage. In the face of chronic frustration, anger gives way in time to a sense of helplessness with a turning to such other sources of gratification as may appear to be available...The sense of deprivation carries with it not only resentment but great longing, a craving that seems insatiable when opportunities for gratification once again present themselves. (p. 112-113).

This corresponds to the view of the family as an open sociocultural system (Minuchin, 1974). Social stressors influence family interaction. Aggression that stems from frustration, violent events, work conditions, social relationships, etc., constitute a constant input that the family has to work through. Sometimes such feelings are displaced onto the weaker members of the family, reproducing the violent, hierarchical relationships of society at large.

According to Minuchin (1974), one of the coping mechanisms used by couples to handle their marital conflicts is the constitution of a rigid triad (triangulation, detouring of the conflict and stable coalitions). When the child is included in the triad, the boundaries around the parental couple become diffuse and the boundary around the triad becomes rigid. "Detouring includes scapegoating as defined by Ackerman and Vogell and Bell, in which the child-victim is attacked as the source of the family problems because of bad behavior" (Levant, 1984, p. 62). A case of child abuse may be included in this concept of scapegoating.

In the past, physical abuse has been considered to belong to the realm of social pathology. The family's role in the development of physical abuse has only recently been studied from a clinical perspective, as it became increasingly clear that individuals affected by family violence may develop psychopathology.

Several conceptual models have been adopted to explain abuse (Burguess, 1978; ICBF, 1989; Wolfe, 1987):

- 1. the intrapsychic or psychiatric model, which focuses on the personal characteristics of the aggressor as determining the abusive behavior;
- 2. the psychosocial model, which considers the environmental impact on the family and the intrafamilial interactions in daily life;
- 3. the sociocultural model, which considers social inequity and cultural values as the cause of abuse.

Today family violence is explained through reference to these three models. In addition, Wolfe (see Table 1) considers that "a transitional model is needed to address the concern about how parents gradually acquire the preconditions that seem to lead to the rather sudden onset of abusive behavior" (Wolfe, 1987, p. 56).

Table 1
Thomas Wolfe's Transitional Model, 1987 (p. 58)

Docta	bilizing	Factors
Desta	DHIZME	ractuis

Compensatory Factors

Stage I: Reduced Tolerance for Stress and Disinhibition of Aggression

- Weak preparation for parenting
- Low control, feedback, predictability
- Stressful life events
- Supportive spouse
- Success at work, school
- Socioeconomic stability
- Social support and models

Stage II: Poor Management of Acute Crisis and Provocation

- Conditioned emotional arousal
- Sources of anger and aggression
- Appraisal of harm/loss, threat
- Improvement in child behavior
- Community programs for parents
- Coping resources

Stage III:

Habitual Patterns of Arousal and Aggression with Family Members

- Child's habituation to physical punishment
- Parent's reinforcement for using strict control techniques
- Child's increase in problem behavior.
- Parental dissatisfaction with physical punishment.
- Child responds favorably to noncoercive methods
- Community restraint/services

Family systems theory views abuse as a symptom of family dysfunction, with the victims of the violent action considered to be both the actual receiver of the physical damage as well as every other member of the family.

According to Silvia Masterman (1988) preconditions for family violence are:

- l. a rigid, hierarchical organization often based on explicit beliefs in biological inequities;
- 2. an authority system in which the power is distributed along hierarchies, conforming domination/subordination, authoritarian relationships;
- 3. a kind of relatedness that impedes autonomy, in which family members interact in a rigid pattern with others without a chance to outline their own identity;
- 4. a family communication system that hides abuse under a veneer of normality;
- 5. a social order supported by traditional factors that legitimize the aggressor and leave the victim without resources to combat the abuse (p. 52, translated by S. Casabianca).

Use and Value of Art Therapy and Family Therapy

Minuchin (1974) has described family therapy as follows:

The therapist joins the family with the goal of changing family organization in such a way that the family members experience change. By facilitating the use of alternative modalities of transaction among family members, the therapist makes use of the family matrix in the process of healing. The changed family offers its members new circumstances and new perspectives

of themselves vis-a-vis their circumstances. The changed organization makes possible a continuous reinforcement of the changed experience, which provides a validation of the changed sense of self.

The individual is not ignored in this theoretical structure. The individual's present is his past plus his current circumstances. Part of his past will always survive, contained and modified by current interactions. Both his past and his unique qualities are part of his social context, which he influences as the context influences him... Structural family therapy utilizes this framework of conceptualizing man in his circumstances. The target of intervention could as well be any other segment of the individual's ecosystem that seems amenable to change-producing strategies (p. 11-12).

Art Therapy is consistent with various aspects of family therapy: the examination of past and current individual and family histories; tapping of preconscious material; achieving defense reduction and insight; providing emotional outlets; identifying dyfunctional behavioral patterns; helping family members differentiate; uncovering conflicts as well as grief and mourning; and improving parenting and problem-solving skills (Landgarten,1987). Symptom relief, structural reorganization and improved functioning are the expected benefits.

As suggested earlier, art productions may yield information not available through verbal means and this may lead to opportune therapeutic interventions which may affect the occurrence of child abuse. "Visual signs that alert the therapist to the existence of child abuse may help that child obtain necessary protection and intervention to prevent further trauma" (Malchiodi, 1990, p. 15).

Art Therapy facilitates access to traumatic images and memories and constitutes an appropriate tool for the assessment of the psychological impact of trauma. Malchiodi (1990) has said that "Art Therapy has proved to be an excellent methodology for assisting traumatized children. It allows them to express their feelings of fear, guilt and anger in a nonverbal, nonthreatening manner." (p. i). It is also useful for observation of the patterns within violent families and in the treatment of these families.

In Family Art Therapy, the major vehicle for diagnosis and treatment is the art task. Specific goals are the resolution of presenting problems and the facilitation of family tasks which characterize the developmental phases in the family life cycle. Symptom relief and longer-term growth of the family can be achieved. According to Kwiatkowska (1978), "Family art evaluation became a routine in numerous institutions, mental health centres, etc., because of the strikingly rich and accurate view of the family relations and dynamics that could be obtained with great economy of family and staff time" (p. 83).

Several art therapy assessment models have been designed for families (Bing, 1970; Kwiatkowska, 1978; Landgarten, 1987) and have served as the basis for research.

The way in which the art directives are utilized will depend upon the clinician's perceptions of their role. Landgarten (1987) has discussed the implications of various theoretical perspectives. The psychoanalytic practitioner may offer interpretations based on individual and family behavior as observed during the creative process or relative to the content of the art. The experientialists, who take an active part in treatment, may provide the family with innovative art experiences that deal with feelings, spontaneity, genuineness, awareness and understanding. The Bowenians, whose approach emphasizes triangulation, can point out this aspect as it is revealed in the unit's art work. Structuralists like Minuchin (1974), who are active directors, may project art interventions to change the family's usual transactional behavior and require members to rearrange their roles. They may also designate directives that manipulate a trial realignment of subsystems and change boundaries. The communication therapists, using the circular causality model of a chain reaction effect, will observe the family's communication patterns and methods of decision making, while engaged in a joint art venture. The strategic therapists may stress paradoxical intervention.

In Family Art Therapy, the value of the art task is threefold, lying in: the process as a diagnostic, interactional and rehearsal tool; the contents as a means of portraying unconscious and conscious communication; and the product as lasting evidence of the group's dynamic (Landgarten, 1987). Family dysfunction may be portrayed during the art production as well as in the artwork.

Chapter V

Cultural Issue

"Violence in families is rooted in societal violence." (Storr, 1978, p. 14).

Cultural considerations are relevant because of the impact on family structure and attitudes toward physical punishment, as reflected in cultural stereotypes and imagery, and national policies towards parental abusive behavior.

As mentioned above, child physical abuse is just one of the manifestations of family violence in a culture where physical punishment and even maltreatment are socially acceptable as child-rearing practices. The explicit message may be that children deserve and need maltreatment.

Social violence permanently reverberates inside the family, disturbing its interactional behavior. Many factors may play a role in the occurrence of child abuse, which seems to grow worse each day: rigid role stereotypes; a tendency towards family disintegration; economic instability; and lack of community-based programs. Recent unpublished studies of youth gangs in Cartagena indicate that youth who display delinquent behavior come from violent homes. It is interesting to note that, notwithstanding the cultural differences, Malchiodi (1990) considers that child abuse also grew worse in North America during the 1980's.

Child abuse is an interactional event that depends to some extent upon situational factors that elicit parental reactions...It is necessary to understand such behavior within the context in which it occurs, the background from which it was derived, and the existing child-rearing norms that tolerate certain levels of violence between family members (Wolfe, 1987, p. 69).

Family structure and functioning are very much determined by the culture in which individuals are immersed. In turn, the family influences, through its members, the cultural events and transformations. Most studies show that family violence is a pattern that can be historically traced back in the lives of the abusers and the victims (Masterman, 1988).

It is not the goal of this thesis to determine why a society is violent. Perhaps a great deal is due to social inequity, chronic frustration that stems from unsuccessful striving to satisfy basic biological, psychological and social needs.

Colombia can be described as an economically dependent country with limited industrialization. Feudal remnants in the systems of production and land tenure may exert profound influences on beliefs and values (Leon, 1984).

As a Third World country, Colombia has its own share of misery. Underemployment and unemployment, and migration from the countryside to the cities have greatly influenced and changed the family structure, size, functions and distribution of roles. Frustration levels are high because of socioeconomic conditions. Many of the phenomena occurring in Colombia today (e.g., organized and unorganized crime) can be explained in this context, while not denying the changes the whole world has undergone.

Eighty percent of the population in Cartagena, Colombia, the city where this study was conducted, have incomes that fall below the cost of living as defined by national criteria. Around 40% of the population in this area lives in what is now called "absolute poverty". Aggression arises from frustration, and society permits physical punishment, which is committed within this context against a chosen scapegoat, usually a "difficult" child who challenges parental power and becomes one more stressor.

In the zone where the families of the study live, there is little chance of finding a job and acquiring a fair daily allowance. Typically, they fish or are involved in informal economic activities. Families have an average of seven members each and houses are overcrowded. Only a small percentage of children have schooling. There is not enough physical or social space in the neighborhood and children and adolescents play in the streets. Gangs have become a common occurrence. Delinquency is common, as is violence between gangs.

Families use poor communication codes. Enmeshed families are generally found where authority allocation is diffuse. A typical family structure is an incomplete nuclear family. Single mothers are common. Very often mothers must work outside the home. As a result, many children are abandoned to their own care or the care of neighbors, usually older children. One can also find disengaged families that grow slowly through the different stages of the vital cycle and impede a real differentiation and autonomy of its members.

Gamines (street kids) are a product of both family violence and family disintegration (Villar Gaviria, 1986). Children's emotional neglect is usually sustained by the common belief that emotional needs of children are minimal.

Physical punishment as a child rearing practice is common in Colombia.

Professionals do not generally relate physical punishment to maltreatment.

Until 1974 the Codigo Civil (Civil Code), instead of punishing the abuser, confirmed the parental right to punish, even by secluding the child in a special "correctional" institution under the approval of a judge. A father's demand was sufficient to make the judge order a child's detention. Thanks to an increased awareness of children's rights the code item has been changed to: "Children's parents or caretakers will look after children's behavior, will correct them and establish mild punishment" (Decreto 2820, 1974, art 21).

Until 1989 Colombia did not have a legal code for children. For the first time, legal procedures were established to deal with people who maltreat children, and to institute protective measures. Although there is now a legal instrument to intervene in cases of abuse, there is inadequate awareness, even among professionals and policemen, about the emotional and psychological implications of physical abuse. Domestic violence is still considered mainly a private affair.

According to Masterman's statements (1988) about preconditions for domestic violence, Colombian culture offers fertile ground for its occurrence.

The fact that the socialization of individuals occurs in a violent family environment is a significant contributor to the culture of violence which is harming the country so much (Colombia: Violencia y Democracia, 1987).

Chapter VI

Methodological Considerations

The Study

Because of the limitations encountered from the beginning of this work, a quasi-experimental study evolved into an observational study. The former would have required a participant observer in each session (if not a co-therapist), a different setting, financial aid to pay the professionals involved in the rating, etc. It would also have required structured sessions and a reduction of variables.

Even referral of the cases constituted an unexpected problem. The turning point in project redesign occurred during the second session with the first case (Rose) when I realized that I could not even apply the proposed art tasks with the families I would be studying.

Observation was centered on the art process of each family member, interaction between family members, investment in the art task, relationship with the therapist, etc. Relevant categories taken into account are listed below.

Ten families were assessed. In their first appointment they were told that they would be part of a study of families, and that they were expected to come once a week for a month for a total of four hour-and-a in the sessions. We also asked for their verbal permission to publish their pictures and data related to their families, and assured them that confidentiality would be observed.

Two families' cases will not be mentioned in this study - one of them because it was a case of rape. A ten year girl was referred to me after being raped by a family friend. Her parents lived separately and after the girl was assaulted, the father decided to bring the child to live with him. The girl's teacher brought her and her father for an art evaluation. The case is not relevant to the purposes of this study. Although sexual aggression is considered an aspect of domestic violence, in this case rape was an isolated event. In the other family excluded from consideration, the parents were in the process of divorce. By the time I saw them, the parents were seeing a social worker and a lawyer concurrently. It was my opinion that there were too many people already intervening in the family.

In all cases, only the referred child's closest relatives were designated for assessment. It would have been impossible to have all family members take part in a session because all families in the study were part of extended families with as many as 21 people living together.

Although every family was asked to attend a weekly session over a four week period, in fact none of the cases met this request. Failure to adhere to specific time requirements seems to be a common pattern among these families. Their lives are highly disorganized. It is difficult for them to plan their time. They usually have temporary jobs and may be called to work on the day of the appointment. I can hardly interpret a tendency to miss appointments as resistance in the psychoanalytic sense. Nonetheless, resistance was occurring: resistance to take on a new burden and a new stressor, as well as resistance because the therapist may have been perceived as an intruder or outsider who

had not been invited to share the private affairs of the family. Most of them displayed rigid maladaptive patterns. Traditional cultural values are not easy to change.

The relationship they have with the agency is one of dependency, because they use several of the free services delivered by the agency. They may feel obligated to come to the appointments out of fear that they could lose the right to use the other services. Sometimes the agency constitutes the only external support they can count on in times of crisis.

As a result, this situation may be quite different from one in which a client voluntarily seeks therapy. The design of an effective institutional program for violent families should take this factor of dependency into account. In addition, an effort should be made to correct misconceptions about the concept of therapy, and to reduce aggression related to underlying issues of control. As well, measures must be incorporated to overcome barriers to establishing trust and rapport in a novel intervention modality framework.

In some of the cases the family came only for the initial assessment session (Don, Kelly, Arthur) while other families were seen for more than four sessions (Albert, for example) because they asked to be seen longer, feeling that the therapist could help them in their desire to improve their parenting skills. None of the families kept weekly appointments. In only one case (Rose), Art Therapy assessment occurred just after a crisis.

Initially, the agency agreed to continue treating the families that were part of this study. Recommendations were given to the families as well as written in their charts so that the families could be followed up or continue therapy with the agency's therapists. If we assume that assessment would produce disclosure of traumatic memories, memories that have been denied or dissociated from the victims, the logical next step would be working through the disclosed material so that the clients acknowledge the pain. Only then can restructuring of the family occur, with family members helped to overcome the symptoms and create healthy attachments (Johnson, 1987).

When physical abuse was dealt with for the first time in a session, I stated firmly that the physical abuse should stop immediately, a position corresponding to Agency policies. Usually, adults were surprised and asked how else they could discipline their children. Were we maybe asking them to let children have their own way? I suggested that they adopt different, non-coercive child-rearing practices and explained how harmful physical punishment could be for a child. I emphasized the importance of establishing reasonable rules and applying them consistently. "Parents who punish inconsistently may be contributing to the acceleration of the behavior they are trying to discourage" (Burguess, 1979, p. 161). I also explained how patterns of violence tend to escalate, making it clear that, instead of learning to obey, children could grow increasingly hostile because of maltreatment.

As a novice exploring both the fields of Family Art Therapy and child abuse, I let myself be guided by theory, former experience and instinct. I usually avoided interpretations, as the short-term nature of the therapeutic relationship in these cases contraindicated a psychoanalytic approach. I tried to create a

holding environment, often using a directive approach when asked for counselling. I encouraged autonomy and stayed at the level of the metaphor very often while discussing art products, as a way of communicating with children and of making family members feel safe.

One of the multiple limitations encountered was that reaching families was always difficult because none of these families had a phone in their homes. In some cases I asked a social worker to visit the family to determine why the family missed several appointments. With the children referred by the HI, dates were usually arranged through the teachers in the HI. In several cases not even this mechanism was available because the child stopped coming to the HI for several weeks.

Contact difficulties were one reason families were always received for Art Therapy, no matter how many members came. As recommended by Minuchin (1974), I considered it valid, for these cases, to work with different subsystems.

Family members produced family portraits and self-portraits spontaneously. In cases when they did not, I asked for such drawings. Self-portraits were requested especially when it was felt necessary to deal with self-image. If one of the members of the family expressed uneasiness with the art tasks, I explained that art skills were not being tested, and that there were no right or wrong ways of creating a drawing. Family members were permitted to choose the subject matter for their drawings when the introduction of a task seemed to increase anxiety about art skills. Only two clients refused to draw in one session.

Structured tasks for assessments are considered to be desirable by several authors (Kwiatkwoska, 1978; Landgarten, 1987; Wadeson, 1980), although Woltmann, quoted by Rubin (1964) observed that "the less structured a nonverbal activity is, the greater is the potential for projective communication" (p.325).

The family drawing is a projective method that has been used in psychology assessment and in Art Therapy (Bing, 1970; Kwiatkowska, 1978; Landgarten, 1987; Wadeson, 1980) because it reflects individual feelings toward the different members of the family, the quality of the parent-child relationship, closeness, isolation, etc. (Malchiou, 1990). Self-portraits have also been used to assess self-image, which in cases of child abuse is usually damaged both in the abusive members as well as in the victims.

Two sizes of white bond and newsprint paper were offered: 50 x 35 cms and 25 x 35 cms. Family members were also offered a box of ten crayons each. Crayons were used for several reasons. First, budgetary constraints precluded the use of any other materials. Second, crayons were readily available. Third, crayons did not pose a technical problem in that no special expertise is required to use them. A potential infantilizing aspect of crayons is discussed in <u>Chapter X</u>, <u>Conclusions</u>.

Family members and I discussed the art products at the end of each task. The children explained what they had produced. With the children, I confined my comments to the level of the metaphor. After each drawing family members were asked to comment on each other's drawing.

To maintain confidentiality, names of subjects in this study have been changed.

Relevant Categories

Observations from family sessions were categorized into <u>art processes</u>, <u>family interactions</u> and <u>finished products</u>. These categories were selected from the research literature (Bing, 1970; Kwiatkwoska, 1978; Malchiodi, 1990).

Subcategories of Art Processes

- Investment
- Affect
- Self-confidence in abilities
- Ability to follow instructions
- Time taken to complete the task
- Independence at work
- Assistance requested
- Self-initiation

Subcategories of Family Interactions

- Organizing role
- Sharing of space and materials
- Establishment of limits
- Verbal expression of feelings
- Capability to relate self to materials presented
- Quality of the child-parent relationship
- Affiliations and alliances

Subcategories of Finished Products

- Manifest content
- Integration into composition
- Movement or action
- Number of colours used
- Colour extent (only outlines?)
- Crowding, use of space
- Destructiveness
- Writing
- Transparency
- Fragmented lines
- Sex differentiation (cultural or physical)
- Facial expressions
- Closeness of family members in family portrait
- Prominence (who)
- Inclusion of other members such as pets
- Isolation (who)
- Scribbles only

Clinical Setting

The clinical setting in which this study took place is one of the multi-service facilities that are part of a national Colombian agency, founded in 1978, for the welfare of families.

A multi-disciplinary team (social workers, lawyers, nutritionists, teachers, etc.) offer the community a range of services including legal advice, counselling, nutritional supplements and education, daycare centres, preschool, and family therapy. There are also recreational activities for children and third age people, as well as courses for different populations. Adoptions, abandoned children, and family violence are some of the issues addressed by this agency.

During 1990, 2207 people were seen in the clinic in which I developed the study. 115 of these were cases of marital violence. There were 144 conflicts in the parent-child dyad. Six children were considered to be in physical or moral danger. There were three cases of child maltreatment. Only two children were placed under legal protection, an incidence significantly below expectations.

People from low sociocultural status were the primary users of this facility. Family income may be below minimum workers' wage. In many cases this clinic constitutes the main and/or the only external resource for these families in times of crisis. They receive nutritional supplements, they can use its community daycare facilities, etc. Family therapy is compulsory for some of these families as a prerequisite to continue receiving support, especially in cases of family violence and couples who want to divorce. The above facts are important in accounting for the dependent relationship that the families develop towards the clinic.

The child abuse cases that appear in this setting are usually brought in by neighbors or the parent who did not abuse the kid, people who were extremely concerned about the life of the child. They had an initial interview with a social worker, who then referred to the lawyer and/or the family therapist working with the clinic. Four of the cases reported to the Center in a seven month period were referred to me. In the cases that were referred to me by the HI, families did not have a prior interview with a social worker but a file was opened in every case and reports were written with recommendations for future interventions.

I spent some time in the preschool observing interactions between children and teachers. The teachers were frequently coercive with children. I observed that handicrafts and art tasks were a frequent activity but the children's products did not actually seem to be valued by the teachers. For financial reasons, art materials were scarce. For example, children were usually given a single piece of crayon with which to draw, so the drawings were monochromatic. My only intervention related to these observations was to talk with the Director of the HI about what was observed, suggesting close supervision and stricter qualification requirements of the teachers. I offered to teach a course on the therapeutic use of art. To date, this has not been possible.

The five children referred to me from the HI come from a six-year-old age group of 45 girls and boys, ten of whom presented behavioral problems. Nine of

these ten children had separated parents and lived with a foster parent or their grandmother.

Neglect was common when the children did not live with both parents. The absence of a supporting spouse or/and their presence in a foster family constituted an economic burden.

There are a number of potential sources of the children's behavioral problems, including the experience of parental divorce and disintegration of the family system, or maltreatment itself. The problems could also be symptomatic of family dysfunction.

My supervisor was a psychologist trained in family therapy and with an artistic background. Supervision was irregular because of time limitations. I attended the clinic every Wednesday afternoon over seven months. At the clinic I used a small, often noisy office with a desk and several chairs. There was a plastic box with some toys (cars, cubes, etc.) in a corner of the room. Most of the toys were broken. There was limited space available for family members to draw, and the place did not offer as much privacy as might be desirable.

Chapter VI

Description of Cases

<u>Rose</u>

Description of the Family

Rose, 12, is Lynda's only child. Rose was the product of an unwanted pregnancy when Lynda was a single mother at 16. Rose's biological father has never looked after her. Lynda, who is 28, started to live with Bill, 35, when Rose was three years old. They have lived together for ten years now and Bill has legally adopted Rose.

During the past year, prior to the Art Therapy assessment, the clinic's psychologist saw the family three times because of severe child abuse denounced by relatives. This time they came to the clinic because Rose's stepfather assaulted her sexually the day before. Rose had escaped to the house of a neighbor. Police were called by the neighbors and Bill is now under arrest. Lynda decided to leave him.

Lynda has worked as a housemaid and says she lost her last job because of Rose's behavioral problems. Lynda complains that Rose behaves like a "whore" even though she has given "all she has been able to give" to her child. Rose does not even want to go to school, Lynda says. She describes Rose as unmanageable and there is plenty of mistrust toward her. Lynda considers Rose to be a liar and reports various stories people have told her about Rose's sexual behavior.

The first time I saw them, Lynda was making a living by selling french fries at a little outdoor place of her own in the public market. She is no longer engaged in this activity because they moved to another neighborhood. After Rose was assaulted by the stepfather, neighbors organized a group to lynch Lynda, apparently because they had seen Lynda's cruel punishments in the past. This led to the flight from the neighborhood.

Rose's version is that her mother did not want her to accuse her stepfather (Bill was the main provider for this family), and threatened to punish her. Lynda says that Rose imagined the whole story, that she had not threatened Rose. Lynda and Rose moved in with 19 other people in Lynda's grandmother's house. Rose is constantly blamed (scapegoated) for all of Lynda's sorrows.

Art Therapy

The psychologist who saw the family before referred them for Art Therapy assessment.

I saw Rose and Lynda four times in a time span of six months. Sexual concerns appeared in Lynda's imagery in what are probably phallic symbols (hand, horse, horse' tongue, the depiction of herself in a reduced size after becoming pregnant).

In her last drawing, Rose produced a sun and a moon ("sun sets, moon rises", she explained), a kind of drawing that I found in other children in similar circumstances, and that could be interpreted in several ways. Is it a depiction of their ambivalence? Does it represent a need for the mother, or hate for the

mother? Are these good and bad introjected images? Is it an image of the self splitting off, following trauma, as a defense (Johnson, 1987)? In trauma, "The results of this splitting off of the self leads to an overall reduction in the person's ability to attach words to feelings, symbolize and fantasize, since any link of affect with cognition may lead to the re-experiencing of the trauma" (Johnson, 1987, p. 7).

Several of what Koppitz (1974) refers to as emotional indicators were present in Rose's drawings: inclined figures, large hands, fragmented lines.

Process of Art Making

Rose.

Investment: Rose enjoyed drawing. The first time she displayed resistance, but once she started she used all the time of the session in drawing. She would even talk and add details to the drawing at the same time. Thus the art experience constituted for this silent child an expressive outlet.

Affect: During the first sessions she was withdrawn, mistrustful and distant from her mother. Sometimes she displayed inappropriate affect, laughing, for example, when her mother was talking about her own abusive behavior, and giving the impression of being mentally retarded. Rose was not verbally expressive.

Self-confidence in abilities: Rose looked comfortable with the tasks, and never expressed concerns about her skills or dissatisfaction with her products.

Ability to follow instructions: She complied with enthusiasm in the family portrait task. She did not ask the therapist for assistance.

Rose displayed no behavioral problems during the sessions. It was not necessary to establish limits. She expressed her feelings more with gestures and non-verbal attitudes than through verbalizing.

Rose related the drawings to her own environment and situations. She avoided talking about her stepfather, expressed her rejection of him but avoided talking about the sexual assault. She denied her mother's complaints about her sexual behavior and was upset with her mother's unwillingness to believe her.

Lynda.

Investment: After Lynda felt reassured that her products would be accepted without judgement by the therapist, she also seemed to enjoy drawing although she seemed hesitant about what she was doing. She invested little time in the actual process of drawing.

Affect: Lynda's affect was variable. During the first interview and the first two sessions, she was hostile towards Rose and showed insecurity about her role as mother. She displayed a need for approval and reassurance, constantly advancing arguments to try to persuade the therapist to side with her. This may indicate a tendency to handle conflict by establishing triangulations.

Self-confidence in abilities: She always expressed her concern that she has poor skills in art and has had little previous experience with art. She did not ask for assistance.

Family Interactions

Neither the mother nor daughter played an organizer role during the sessions. They acted quite detached from each other. They never shared space or materials. During the second session Rose looked quite upset with her mother but her mood changed as soon as she started to draw, as if it were a cathartic experience. There was a fight depicted in her family drawing of the same day, drawn when she realized that she had not included her mother in the drawing.

Finished Products

Rose.

Her use of colour and space and her attempts at creating a composition expanded during the time I saw the family. The imagery also evolved as can be seen in the differences between the first and the last house drawings.

Family portrait.

Rose's family was drawn as consisting of women only, not engaged in any common activity but just standing in a line, separated from each other.

She titled her family portrait "la familia" (the family), written in the upper middle of the page. The female figures in her drawing had shirts and feminine hairdos (cultural differentiation of sex). All the people in the family were depicted as smiling, perhaps revealing her desire for a kind relationship between family members.

Lynda.

There is a big difference between the first and the last drawings which is probably related to her increased confidence in her ability to produce an acceptable product. She had to take her time with every line in the beginning, while in the last session she created a kind of kinetic drawing, horizontal curved blue lines that represented the sea with a blue fish on the surface of the water. It would be very optimistic to consider this the result of therapeutic interventions during the few art sessions. But undoubtedly she discovered something new about herself while drawing - the possibility of creating from nothing, of achieving an aesthetic product.

Lynda's initial drawings were outlines that resembled parts of patterns for a dress seam. It seemed as if she were drawing pieces of the puzzle of her disorganized thoughts.

Family portrait.

She produced two different family drawings. Both of them included her mother and grandmother, probably her two most significant relatives. When she included one of her sisters in the first family drawing she may have indicated that this sister was her best friend in life. The greater detail in this figure tends to confirm this possibility. The presence of her sister may also indicate a desire to escape from the pain of further dissociative acting out behavior or of binding anxiety.

First Session

I was a participant observer when the clinic's psychologist interviewed the family the day after Rose was sexually assaulted. Following a brief verbal interview, it was decided that I would to see them in Art Therapy. A social worker is taking care of the charge against Rose's stepfather.

Both Rose and Lynda missed their first appointment. Lynda came into the office the next week, bringing in a three year old niece. This gave me the impression that Lynda needs the child as a shield. Was she trying to show me how she performs a maternal role, how tender she can be, so that I would become her ally?

She could not get Rose to come, she says. Rose is not staying with her but with a family friend. Lynda did not even want to see her. Lynda offers explanations. Rose got lost last week and Lynda could not find her until several

days later. Lynda explains that she was about to be lynched because Rose made the neighbors believe that she was going to maltreat her. Lynda says Rose is a liar. She agrees that she has maltreated Rose from the age of seven because of her behavior, but says that she has tried to control herself since the psychologist explained to her that she could harm Rose. She has bitten her daughter (Rose had shown me the scars in her arms), she has whipped her with barbed wire and has hit Rose with different objects.

Her thought is somewhat disorganized, she jumps from one issue to the next and introduces persecutory ideas (which may be reality based). For example, she is fearful of going back to the neighborhood where she used to live.

Lynda's words have the quality of "confessions" that give her relief.

Lynda expresses her preoccupation with Rose's sexual behavior. "If Rose gets pregnant, I will fail as a mother and besides it will be a new burden to me!", says Lynda. She says that she does not want her daughter to re-live her own history (projective identification). Lynda says that she was "deceived" by her boyfriend, who seduced her, when she was 15, into a sexual relationship without Lynda actually being compliant or understanding what was going on . As a result she got pregnant.

I ask her to express her feelings in a drawing. She complains about her art skills. She outlines a figure that looks like a person's profile (Figure 1). She used the blue felt marker that was almost dry and changed to the black marker, therefore only part of the figure is actually visible.

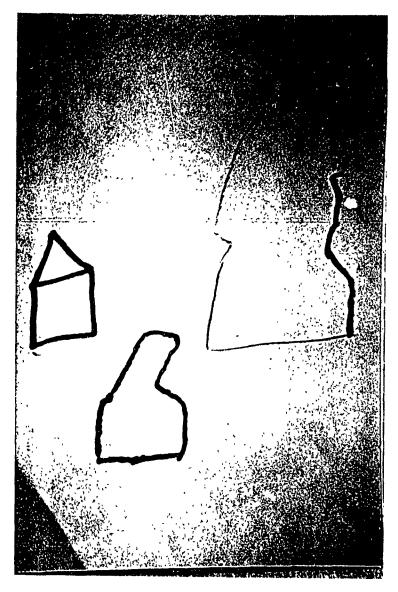


Figure 1

Then she drew a stereotypical house to the left, without windows or door (are they transparent or is the house without means of access?). To finish she adds another, smaller outlined figure. She says that both figures represent herself, the larger when she was still a virgin, the smaller when she was pregnant. The second figure is a phallic representation (traumatic sexualization?

Finkelor and Browne cited by Malchiodi, 1990). Both figures seem to represent a feeling of emptiness. Distortion of body images in victims of sexual abuse has been described by Malchiodi (1990). The diminished size of the self-representation seems to symbolize how she lost self-esteem and probably social status by becoming a single mother.

She immediately associates her pregnancy with her current situation: "Because of Rose I am again living with my mother. Because Rose denounced my partner I had to leave him and now I do not have a way of making a living". She confesses how badly she feels because of her dependency on her mother, who has always been harsh to her. She, too, was physically abused by her mother when she was a child.

I ask her for a family drawing. She draws four figures representing mother, grandmother, aunt and stepsister. She does not include herself in the drawing. (Her sense of belonging is probably compromised and therefore, probably, so is her sense of identity). The figure that represents her stepsister is different from the others in that she tried to present the hair and face in more detail (an action corresponding with her affirmation that this is the most significant person in her life). Lynda does not include her biological sister, her other six stepsisters, nor her daughter. It seems that she has not fully separated from her family of origin and thus family of origin members continue to be the most significant people in her life.

She asks for counselling about how to treat Rose. She lists all the sacrifices she has made for her child. It seems that she has been buying her affect with presents to ensure her good behavior. But because Lynda does not get what she expects, she maltreats Rose, feels guilty, and afterwards repairs her guilt by bringing a gift to the child, in a circular pattern similar to what has been observed in marital violence. Maybe she expects Rose to replace the lost original self-object. Rose is meant to give her all the mirroring, the respect and affection she did not have as a child (Miller, 1981). Alternatively, she may be displacing her needs with her husband onto Rose (reaction formation).

I insist that she bring in Rose. I help her reflect on her parenting and emphasize the importance of establishing consistent rules and limits.

Second Session

When I arrive at the clinic, the social worker who has been dealing with this case tells me that Rose had arrived shouting, because her mother forced her to leave school, dragged her along the street and brought her to the clinic. When Rose expressed anxiety because she did not ask permission from her school so that she could come, the social worker called the school to explain that Rose and her mother had an appointment at the clinic. This was a typical violent interaction between Lynda and Rose.

Assessment was not conducted as planned, as a structured session, because of the extreme distress in both of them. Under the circumstances, it would have been impossible to carry on with the session without providing supportive psychotherapy that could allow both Rose and Lynda to communicate with the therapist and to establish a minimum interaction between them. This case made me realize that I would have to follow a rather pragmatic approach.

When they enter the office, Rose takes a chair and brings it close to the table. Lynda sits behind, looking ashamed, until I motion to her to get closer. I respond to Rose's approach, expressing my empathy with her anxiety and at the same time I try to help Lynda not to feel blamed but understood. Rose continues looking at the floor. Lynda accuses Rose of constant disobedience and justifies the use of force to make Rose obey, to counteract her "rebelliousness".

Therapist: You say rebelliousness? I have the feeling that she is feeling hurt because of the way you treat her.

Lynda: Then, should I let her do whatever she wants?

Therapist: What is it that she wants?

Lynda: To wander about.

Therapist: She was not wandering today when you forced her to come.

Lynda: No, but she always wants to be out of the house.

Therapist: Always?

Lynda: Well, not always, but every evening...

Therapist: And the trouble is...

Lynda: I never know where she is, when she will arrive home.

Therapist: If you want to know, why don't you ask her?

Lynda: (looks at Rose but does not ask her)

Rose: (looks at me but says nothing)

Therapist: (to Rose) You go with your friends?

Rose: Yes.

Therapist: Who is your best friend?

Rose: Joan.

Therapist: Lynda, do you have any problem letting Rose go to her friend's, for example, to Joan's place?

Lynda: No, I don't.

By engaging in this kind of dialogue with Lynda, I tried to detotalize her affirmations and punctuate their verbal communication (Watzlawick, Jackson & Beavin, 1967).

In the families I studied, I found that, in general, rules are inconsistent and sometimes there is not even a good reason to apply them. As in this case, it is not clear what Lynda considered to be Rose's transgression. Was it playing in the streets? Was it staying out longer than allowed?

After the conversation I ask them to draw their feelings. Lynda says she painted last week. I explain to her that they will paint every session. Rose says she does not want to paint. Lynda then announces that she is going to draw her hand. She places her own hand on the paper and outlines it. Then she draws the nails (Figure 2).

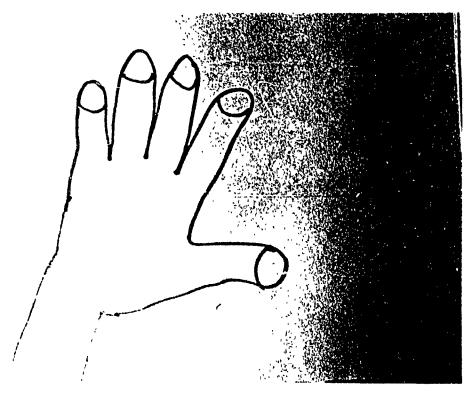


Figure 2

In the meanwhile, Rose has taken a felt pen and has drawn a house, two trees, two clouds. When she has finished, I talk with her about the drawing. She describes it as her neighborhood and I ask her where the street would be in the drawing.

Rose: Around the corner.

Therapist: Can you show me the way?

She draws a pathway that leads to the street, in Lynda's direction, which makes me think that despite her hostility, there is a desire for reconciliation.

This intervention was analyzed with my supervisor. Did I make Rose feel that something was lacking in her drawing? Did I invite her to look for the street,

which is precisely what her mother has said she does not want Rose to do? Was this countertransference? Was I responding to Rose's transferential feelings toward me, playing the "good mother", taking sides with the child, the victim? My supervisor suggests that it was not desirable to weaken Lynda's position in front of the child because that is already part of the problem. The mother is not a strong enough authority figure for Rose.

Rose describes the trees as apple trees. Apples are a cultural symbol for health and wealth but the apple tree can also refer to what has been the main topic in the session - good and evil, right and wrong.

Rose describes the day in the picture as cloudy and that's why the windows and doors are closed. It is not the kind of disproportionate or excessive weather that Manning (1987) describes in her projective series. Clouds were commonly found in children's drawings in this study and in the drawings of four more children seen in private practice. Although all those children were abused, and clouds have been described as present in the drawings of children from families in conflict (Koppitz, 1974), I have the feeling that it can also be a cultural symbol or stereotype. Clouds are also present as an aesthetic element in most of the landscape watercolours painted by local artists. Also, I had an opportunity to see many free-drawings in a school for healthy middle class children, and found clouds in most of the landscapes.

In order to establish rapport and ease communication with this deprived child, I decided to nourish her, metaphorically. In Art Therapy one feeds the clients with paper and materials, one offers oneself as ego auxiliary, one believes that metaphors will be incorporated by the unconscious.

I invite her to play.

Therapist: If I gave you a pet, what animal would you prefer? (Symbol for company and friendship)

Rose: A cat.

Therapist: Where would you place it?

She paints it beside the left tree.

Therapist: Curtains? (A symbol for privacy)

She paints curtains in the windows.

Therapist: A ball. [A symbol for play and for giving her permission to be a child (Malchiodi, 1990)]

She paints a large ball beside the other tree.

Therapist: A bird.

She paints a bird in the sky. She looks anxious while trying to decide how to paint a bird, but solved the problem. Afterwards I learned that, while in my own cultural symbolism a bird is a symbol for freedom, in the social class from which Rose comes, a bird is a symbol for imprisonment. Birds are in a cage and cage is a word used for jail in Spanish. The anxiety could also be related to this meaning, especially when we remember that Lynda is not only constantly blaming her for her behavior but announcing that she will end up in jail as a delinquent.

I ask them to talk about each other's drawings because "the art production is individual, but the discussion becomes transactional" (Bing, 1970, p. 174).

I ask Rose to express what she feels about her mother's drawing of the hand. I see it as the hand that punishes, I say. I attempt to help Rose express her hostility towards her mother's abuse, remembering Miller's words (1986):

Such (adult) support can help children perceive that a wrong (physical abuse) has been done to them and thus make it possible for them to integrate this unhappy segment of reality into their lives. Then they will not have to spend the rest of their lives blaming themselves for what happened to them (p. 311).

The hand became the subject matter of Lynda's drawing as soon as Rose assumed the defiant attitude that bothers her mother so much. It seems that Lynda cannot stand Rose's attempts at reaching autonomy. Rose felt motivated to draw when her mother started to draw. Probably Rose's drawing is a response to her mother's, because it was produced immediately after. Does the house represent a shelter to protect herself from the hand that punishes?

The hand Lynda drew (Figure 2) probably represents a power symbol, because of its big size, because of its phallic fingers. Perhaps that's what their conflicts are about, a power struggle in which Lynda needs Rose to validate her as a mother. A mother's unfulfilled need for respect is passed on to the child (Miller, 1986).

The hand may also denote feelings of guilt for projected activities involving Rose and her "friends". Did Lynda, as an adolescent, act out in a sexual manner? Perhaps there should be exploration of Lynda's unresolved feelings about what she is projecting onto her daughter's behavior, leading to a re-alignment of themselves within the family system. Opening up of both the mother and daughter could permit Lynda to adopt a clearer parental position of concern for the welfare of her daughter.

When Lynda talks about Rose's drawing, she says that the house must represent the house in which they would like to live instead of the overcrowded grandmother's house. I suggest that they make a family drawing.

In this family drawing Lynda includes (from left to right, Figure 3) her mother, which is the most detailed figure, with enormous feet, and a childish, smiling facial expression. There is also an outline (that looks like a bird) that she describes as "nothing"; a horse (which is only a horse's head with an emphasis on the mouth and tongue); her uncle (who has no arms and so cannot reach her?); her grandmother with large arms that look like garrotes (probably a symbol for mistreatment). There is a small figure on top that looks like a hand with a finger pointing forward (in Rose's direction, looking like the finger that accuses). She says she included the horse because she wants to run away as far as she can. Of course she could get nowhere with such a horse, which may reveal her ambivalent feelings and her feelings of incompetence.

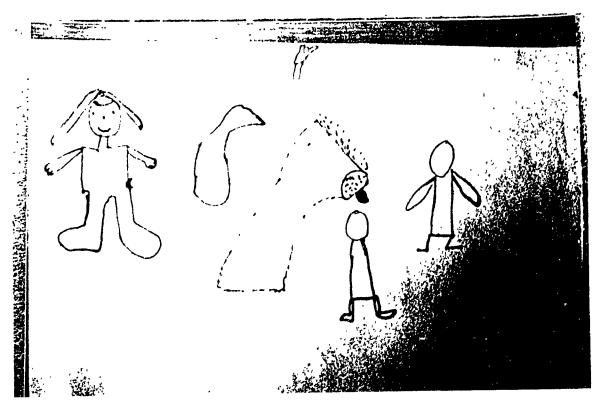


Figure 3

It is peculiar to see how Lynda's preoccupation with sexuality is projected into her drawings. She constantly expresses her preoccupation with Rose's sexual behavior, readily interpreted as a projection of her own concerns about her sexuality. In her cultural environment, sex is a means of survival, not because women necessarily would end in prostitution, but because thanks to sex they may find a provider for their other needs.

In Lynda's family drawing, grandmother and uncle were drawn without facial features. Nor are there indicators of sexual differences. This makes me think of identity problems, which are frequently found among enmeshed families.

In Rose's family portrait (Figure 4), she includes her great-grandmother, four of her aunts and a cousin. As she finishes, she notes that she has not included her mother in her drawing but she does not comment on not having included herself. She adds a scribble on the right of the page and describes it as a fight with mother. It probably reflects a phantasy (Klein, 1959) of mother's disintegration. While she explains who is who in the drawing that she had announced as finished, she continues working on it, decorating the dresses and redoing the outlines as if she is preoccupied with the importance of being seen. One of her aunts is painted without arms, the other female figures have thin arms with very big hands. Faces are smiling and one of the aunt's legs is cut by the bottom of the page. Rose is probably describing, through the different depiction of arms and legs, who can and who cannot "handle" things at home and perhaps even who uses hands to punish.

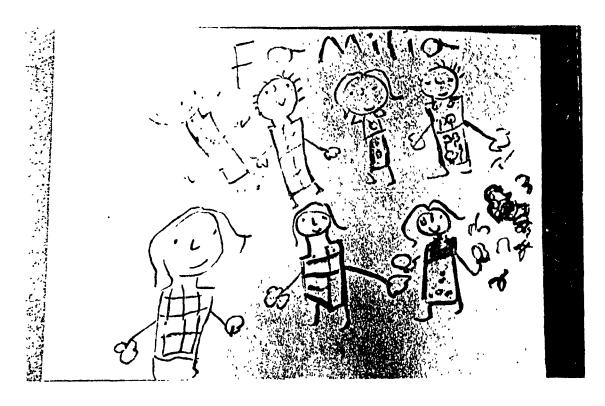


Figure 4

I consider art to have been very useful in helping Rose overcome her resistance to express her feelings. She could communicate on paper, using metaphors. The interactions that followed the comments about the drawings allowed both mother and child to directly face the abusive issues.

When Rose noticed that her mother had not included her in the family drawing, she brought up her mother's lack of affection and abuse and talked about her mother's punishments, showing me the scars in her arms, produced by Lynda's bites. Lynda verbally expressed love and concern and even tried to caress Rose, a gesture the child rejected.

Lynda states that she would not punish Rose if her daughter would only obey her. This statement leads to a discussion about what each wants to change in the relationship. Landgarten (1987) states that, as an agent of change, the Art Therapist intrudes upon the family system and disturbs the balance that keeps the rigid patterns of interaction, and helps to reorganize the family in a more satisfactory way.

Lynda brings about the issue of her former partner assaulting Rose but Rose denies that something had happened (suppression). Lynda tells the therapist that Rose does not want to use Bill's last name anymore.

My supervisor saw these drawings with me. He suggested that some of Lynda's drawings can be interpreted as having psychotic features. He says he has the impression that Lynda has a borderline personality.

Lynda and Rose failed to keep their next appointment and as Rose is under law protection, the social worker made a home visit. She found an extended family with 21 members living in a three room house. There are only two beds in the house and Lynda and Rose share a mattress placed on the floor. The social worker reports that the relationship between Rose and Lynda has improved a little. Rose is attending two schools, morning and afternoon (this was her mother's solution to have her cared for, because at her grandmother's home no one would take responsibility for Rose) and it seems that Lynda has found a job and has stopped physical punishment. The social worker has made another appointment but once more they fail to come. My Canadian supervisor

suggested, after reading the first draft of this thesis, that there was perhaps too much interruptive work in the first session and it is better to limit interventions until the family is engaged and given enhancement tools to rebuild elements of a successful and positive experience in the therapeutic relationship and in familiar relationships.

Four months latter, Lynda comes by herself asking for counselling because she is again having trouble with Rose's behavior. An appointment is made to come with Rose the next week.

Third Session

Three weeks later both of them come to the clinic. Rose has brought a two year old neighbor who falls asleep in her lap and limits her movements. Lynda explains that bringing the child is one of Rose's caprices, that she (Rose) likes kids for a while and then gets tired of them. Lynda mentions that she is thinking about getting Rose a job babysitting in a community based daycare.

Lynda informs me that under someone's counselling she has taken Rose to an institution "for epileptics" (a neurological institute) and a psychiatrist prescribed Melleril. Now Rose has quit school but her mother is satisfied with her behavior because Rose is less hostile toward her. Rose sleeps most of the time at home and it has been impossible for Lynda to get Rose to help her with home chores or to accept limits.

I ask both of them to produce a drawing.

Rose paints a house (Figure 5) which is inclined to the right. It is a tall house with an orange roof, divided in two by a line. The house has a light and two green windows, a small door and a blue pathway that comes out of the door and looks like a brook. There are two trees with an organic quality on both sides of the house. Their trunks are larger than their canopies. There is a black base on both trees (underlying depression). There are also two clouds, a sun and a moon, both outlined in blue. She repeats a symbol in dyads, like representing the mother-child dyad separated by the house. It probably refers to a normal age developmental task: individuation, which has been impeded by a mother who unconsciously strives to maintain a symbiotic relationship. Mother and child are enmeshed in a relationship where the mother abandons Rose every time the child makes attempts at achieving autonomy.

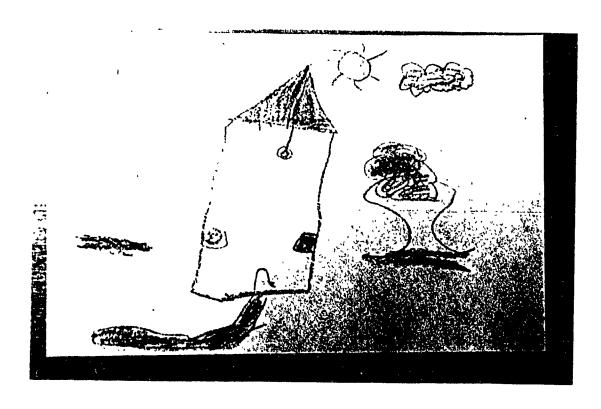


Figure 5

In retrospect, it would have been productive to explore the meaning of the split in the roof in Rose's drawing. Since the attic represents dreams and phantasies in the projective literature, the vertical line in the roof could have been used, as a metaphor for the separation of phantasy and reality, to assist communication between Rose and the therapist.

In her own drawing, Lynda uses a blue crayon. Exerting very little pressure on the paper, she scribbles curved horizontal lines that represent the sea. She then draws a fish on the surface of the water. Something has surfaced here. This drawing has a very different quality from the previous ones. She draws in a freer fashion, expressing more confidence as well as her desire to be free.

There was not a termination session because therapy was supposed to continue afterwards. After the Christmas holidays it was not possible to make arrangements with the agency in order to continue therapy with the families described in this work.

Summary

Rose and her mother Lynda were seen in four different sessions during a time span of six months. Lynda has physically maltreated Rose since the child was seven years old. Lynda blames Rose for all of her sorrows. Lynda was also physically abused by her own mother when she was a child. They came to the clinic after Rose was sexually assaulted by her stepfather. He was arrested and Lynda decided to separate from him. After a brief interview with the clinic's psychologist, they were referred for Art Therapy assessment.

During the Art Therapy sessions, a trusting relationship developed between the child and the therapist. Lynda's tendency to blame Rose attentuated. Lynda was encouraged to find noncoercive means of disciplining, she was alerted to the need for consistent rules, and to Rose's need for autonomy.

Looking at Lynda's drawings with my supervisor, a psychotic disorder was suspected. Protective measures were recommended for Rose but the agency decided that because Rose has a large extended family (regardless of how dysfunctional it was), she will not be placed in a foster home. I believe this case will require longer, in-depth therapy for both mother and child. If abuse continues, which is very likely, Rose will have to be placed in a foster home. Rose's drawings symbolized her diminished sense of belonging and her ambivalent feelings towards an abusive mother.

Albert

Description of the family

Albert, age 6, and Bernard, age 5, were born from Frank, age 32, and Elaine, age 28. Frank and Elaine separated 4 years before the study. Since the separation, Albert and Bernard have been living with Frank and his own mother, Francine, age 65. Albert and Bernard seldom saw their mother before Art Therapy evaluation.

Francine is a widow with seven married children, all of whom, except for Frank, live out of town. She works occasionally as a housemaid or washes laundry for other people. Francine bears the burden of providing the family with its needs.

Elaine became detached from Albert and Bernard when she acquired a new partner and formed a new family. Elaine now has two more children, Carla, age 2, and Diane, age 1. A year ago Elaine separated from her current partner. Elaine does not work and receives no financial help from her two former partners.

Frank has an unstable work pattern, has little schooling and has a poor relationship with his children. He lives with his mother part of the time and travels to a neighboring city where one of his brothers gets temporary work for him.

After the onset of the Art Therapy assessment, Elaine and her daughters joined Francine several days a week to help Francine with her laundry work. One of the most significant immediate stressors in the family is low income.

While the grandmother-grandson system tends toward enmeshment, the biological father takes a disengaged position with regard to that system. Enmeshment undermines children's independence.

Albert was referred by the HI, which he has been attending for three years. The teacher claims that he relates to peers in an aggressive manner (physical aggression). He is sometimes withdrawn, sometimes overactive, and seldom complies with teachers or peers. Physical abuse is suspected.

Art Therapy

The family assessment sessions were scheduled once a week. After the second session, Elaine asked to be seen for more than the four agreed sessions but missed several appointments, so that from the first session on July 31, 1991 to the last one on October 31, 1991, I saw them five times with intervals of three to five weeks between sessions.

Frank never attended the sessions. There was always one reason or another to explain his absence.

The youngest child, Diane, never drew, despite encouragement and the offering of materials to her. She usually crawled around the office, playing with the toys found in the box. Unfortunately, it is not possible to provide interpretations of Diane's toy-playing activities, for the following reasons. Observations or Diane are incomplete because of the concurrent activity of other members of the family attending the sessions. In addition, and perhaps more importantly, the toys were toys only in the most general sense. That is, none of the toys were complete entities. Rather, the toy box contained only fragments of toys (e.g., wheels of cars), or toys that were in such a broken state that neither their structure nor function permitted systematic play interaction.

Carla filled several pages with her scribbles every session. Only Carla, who was highly demanding of attention, requested assistance. She wanted me to hand her one crayon after another. In two sessions she established a kind of ritual in which she would ask for a crayon, paint a line, demand another colour and so on. Carla's ritual may be symbolic of both her great need as well as her feeling that the therapist is unable to satisfy or even understand that need.

Francine was supportive of her two grandsons and of Elaine. Elaine drew nearer to her sons and Francine after the first conjoint session. She was quite interested in improving her parenting skills. Both she and Francine shared space with their children without problems.

Francine was usually the one to establish limits on the boys.

They started to openly express their feelings during the third session. Elaine's drawings generally expressed her concern about the children. In one strange drawing (Figure 6) Elaine drew what looks like an umbrella and children hanging from above (murderous phantasies?). She said she had painted a carrousel with dolls hanging on it (that particular session had been chaotic: sickening as a ride in a carrousel?). Perhaps she was depicting the way she felt about children during a session in which they were specially overactive and noisy, with Carla being especially demanding. During that session the children moved around all the time, two of their dogs came with them, and Francine twice took the animals outside. Diane crawled around the floor and through the 20 cm space between the door and the floor to the outside hall. Elaine and Francine looked overwhelmed and unable to cope.

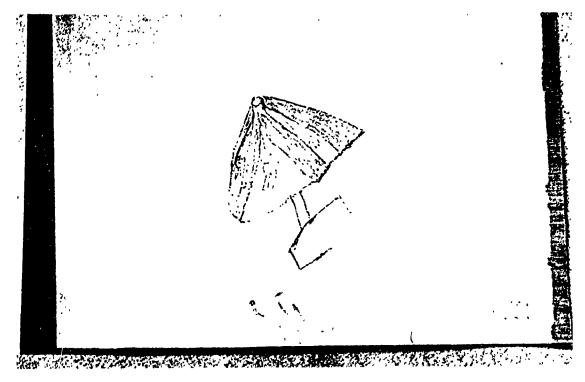


Figure 6

Francine recognized herself in her female drawings but could not relate the content of the drawing to her current situation. Use of colour and space was limited in Francine. She made only one colourful drawing. Most of the time she used only one or two colours. In addition, she did not use the whole space on the page. Usually, she placed different unconnected figures around the page without an attempt at composition. Bernard would use just one colour but insisted that he have almost all the ten crayons of the box in his hand. Sharing the crayons was difficult for Bernard.

Albert would draw an outline first and then fill the contents with colours. Manning (1987) describes this pattern as present in her subjects, children who were victims of aggression. Albert's topics were robots, cars, planes, a Ninja Turtle, and a menacing dog, all power figures displaying aggressive teelings. In one drawing he drew the sun beside the moon as observed in other children's drawings in the study (ambivalence, splitting?).

Process of Art Making

Albert.

Investment: It was always Albert who seemed to be more invested in the art making. He would rapidly finish the first drawing, go and play for a while and then come back to the table to continue drawing the next figure.

Affect: He looked hostile toward his grandmother, always laughing at her drawings which he would try to emulate. He was kind with Bernard and harsh with Carla (a pattern of "me male"). He asked several times if he could have the crayons with him but placed them on the table without problems at the end of the session after keeping them in the box. He was glad to help keep track of the crayons and with office clean up.

Self-confidence: Albert was quite proud of his finished products and confident of his skills. Francine encourages art activities at home and praises the children for their achievements.

Bernard.

Investment: He was enthusiastic about the art task and tried to follow instructions although he had doubts about his own abilities.

Affect: He was usually withdrawn and shy. Verbal expression was infrequent. He always sat near his grandmother and constantly sought her reassurance and physical contact. When he finished a drawing, he looked eager to have his grandmother's praise.

Self-confidence: Albert was identified as an artist by the other family members. Bernard seemed insecure about his art skills at the beginning and did not receive praise or encouragement. In fact, the family seemed quite insensitive to Bernard's achievements. When he noticed that I accepted his products without judgement, he started to behave in a more confident manner.

Francine.

Investment: She took a long time to complete her drawing and left it unfinished as soon as she realized that the others had finished. She appeared to enjoy the activities.

Affect: Francine was usually in a depressed mood. In the second session Francine looked especially depressed, expressing worries about their debts. Her mood seemed to influence all the other members of the family, as can be seen in their imagery.

Self-confidence: She was always concerned about her skills and her selfimages reflected her doubts about her competence as a maternal figure.

Elaine.

Investment: Elaine used to interrupt her drawing to talk about her children, her concerns about their financial problems, etc. She was usually so invested in the art making that she would ignore Carla's demands and crying and also seemed not to be affected by the children's behavior.

Affect: She displayed a plain affect most of the time, talking about different issues like her solitude or problems with her children's behavior at home, with no concomitant display of corresponding affect.

Self-confidence: She never expressed concerns about her art abilities but instead was worried about her parenting skills and how could she improve them. She is a very dependent woman.

Carla.

Her art behavior was very much normal for her age. She demanded attention from both her mother and the therapist. She was whiny most of the time.

Diane.

Diane would use the crayon not on the paper but on the floor, abandoning it very quickly. She crawled around most of the session, exploring the space, without interfering with her siblings' activities. She would examine objects she found on the floor and then abandon them to explore other areas and objects. Elaine paid little attention to her and the child did not demand her attention.

First Session

Albert, his brother Bernard, and Francine came to the session. The father, Frank, did not come because he was not informed about the appointment.

Francine complains from the beginning about her poor art skills (she is illiterate, she says, and has not been taught to draw).

Bernard is withdrawn and quiet and asks his grandmother for instructions. Bernard is the most dependent member of the family. He is very insecure and needs constant reassurance. Francine is warm though directive, telling Bernard that he can do whatever he wants on the paper and giving him ideas about what to do. Bernard starts drawing circles in a row, in blue and red (Figure 7), that seem to correspond to a school stereotype, the kind of exercise that precedes writing.

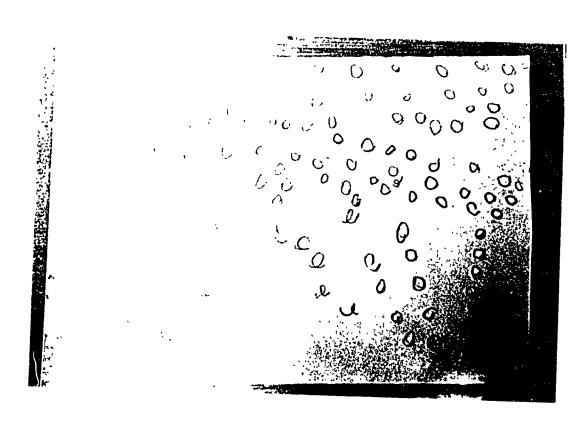


Figure 7

Albert explores the office before sitting down. He finds a box with some cubes and toys inside. He invites Bernard to play. Bernard looks at his grandmother for approval. She tells him to keep quiet and calls Albert to his seat. Albert then looks at the table, finds the crayon box and expresses excitement about having a whole box to himself. (As mentioned elsewhere, financial limitations in his preschool permit only one piece of crayon for each child, which may limit use of colour in drawing.)

Albert has some difficulty concentrating on his drawing task. He is overactive, wanting to draw and explore and play at the same time. Suddenly he announces that he will paint a dog (Figure 8) and while drawing the outline he says this dog will bite anyone who dares to get close to his home. It appears to be a warning for the therapist and is a response to Francine's complaints about him. He draws a profile of a dog with a large mouth and big teeth, two ears, two legs, a pointy tail and a point for an eye. It is probably a symbol of phallic aggression, corresponding to his developmental level. After playing for a while he comes back to the table, announces he will now paint a tree. Again the outline is made first and then he fills the figure with different colours. In this case there is correspondence between colour and object.

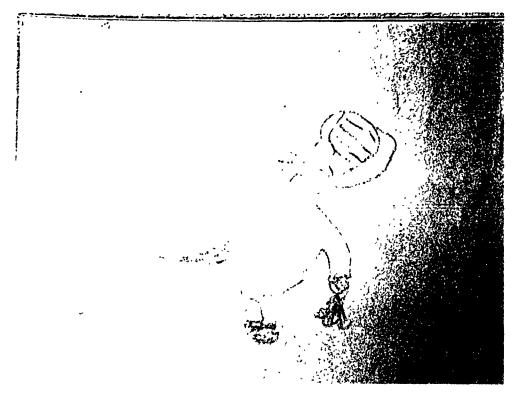


Figure 8

The children's play has a manic character. They jump, then sit on the floor, peek into the different objects they find in the office, take out some cubes from the box and make a tower, destroy the tower, and so on.

Francine has drawn a house with two closed doors and no windows. The house is inclined to the right, probably representing her feelings of instability. Then she paints two flowers to the left, and two ducks. The drawing seems to correspond to her childhood home in the country side - a house with a garden and pets. In the upper part of the page she includes two apples. There is no

attempt at an orderly arrangement of objects in space. She uses just one colour, purple, exerting very little pressure on the paper and thus producing a pale drawing (low investment of energy). I feel that she is probably depressed because of her own affective needs and her difficulty in setting limits on the childrens' behavior.

She looks at Albert's drawing and praises him, reaffirming that she does not know how to paint but her grandson indeed does. Albert looks at his grandmother's drawing, laughs at it and says he is going to paint a duck himself, which he does.

Albert's behavior toward his grandmother conforms to the cultural stereotype of the "macho". He seems to play a role of husband. He is directive towards her, mocking and demeaning. This behavior in a six year old child may be explained as learned behavior. Who else treats her that way? Probably the son that disappoints her so much but with whom she has to continue playing the submissive role of a female. There is a pattern related to the roles that women perpetuate. They seem to place all of their expectations for a better future for the family on the male members and thus they conjugalize and parentalize the child, placing a very heavy burden on a child of his age. Albert's phallic aggression could also be related to maternal expectations.

I suggest that the three of them share a large sheet of paper and try to create a joint drawing. They gladly accept but they keep their own separate spaces on the sheet and never discuss what they do.

Francine takes the initiative, doing a self-portrait, an orange female figure (Figure 9) with which she identifies, but that looks younger than she is. The figure has a smiling face and short arms, with one of the arms holding a very small broom. This image is probably a representation of her feelings of incompetence. Francine's self-portrait has an overall gestalt shape of a keyhole, a shape that recurred in two sessions. The keyhole shape may represent a desire to peek through to her secrets, to reveal her real self, to uncover her secret sorrow.

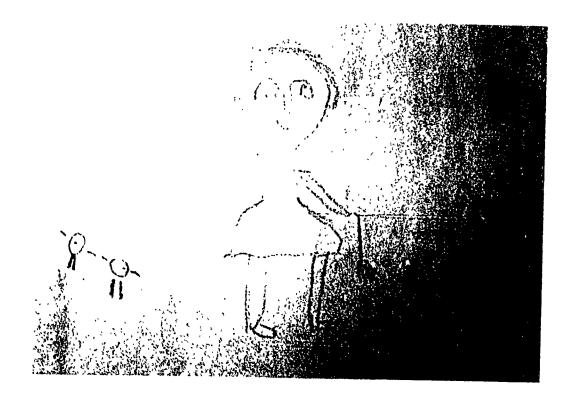


Figure 9

Bernard asks her how to paint "muñequitos" (little dolls). Francine shows him. He adds sticks for arms and legs and pointy eyes to the circles he had started to paint. Albert again laughs at his grandmother's drawing and emulates her painting by drawing a female figure with enormous arms (contrasting with small arms in Francine's figure) and big feet (pathological aggression? Koppitz, 1974). The relationship between siblings is one of sharing and cooperation. Bernard acts as if he is admiring his son and Albert plays the role of the older, protective brother.

Bernard has drawn several "muñequitos" and says he painted his family (Figure 10). When I ask Bernard to identify the members of his family, Albert answers for Bernard (the sibling system seems to be enmeshed). They both deny the existence of sisters, probably suppressing the traumatic memories associated with parental divorce and their mother's abandonment. After the grandmother insists that they have two sisters (the boys had seen them only once in a while), Carla was recognized by Albert but not by Bernard.



Figure 10

Francine talks about Albert's behavioral problems and explains how she disciplines her grandsons (using spanking quite often and occasionally beating with objects). She has difficulties in setting limits. She looks exhausted at her 65 years, still rearing children without much help. I insist that Albert's father and mother attend the next session.

I hypothesize one reason for the family maintaining the father in a peripheral position. If the father were told about the childrens' problems at school, for example, and insisted on disciplining the children, he would do so, but would be quite harsh and produce feelings of guilt. He would reaffirm the cultural stereotype that women are incompetent and cannot solve a problem by

themselves. Typically, there is often very little demand on the male, basically because he is the provider and cultural roles are quite inflexible, and also because female demands may lead the father to completely abandon the family. They would not risk losing his support by enraging him.

Virginia Gutierrez (1989) a Colombian anthropologist, considers that our Northcoast culture has traditionally been matriarchal, with primacy of the grandmother in the family. Men are dominant in society but the home is the realm of women. This leads the family to keep fathers aloof.

Francine is disillusioned with her son (Albert's father), complaining about his irresponsible behavior and the minimal assistance he provides with both the children and the expenses. He has not been able to find a job because he has not yet acquired the "Tarjeta militar". As Militar Service is compulsory in Colombia, men cannot be employed unless they possess a card certifying that they have performed their duty or are exempted.

Second Session

Francine. Albert, Bernard, Elaine, Carla and Diane attend. Francine states that Frank could not come because he got a temporary job. It is election time, a good time for getting a job. Bernard looks less insecure than in the previous session. Albert's investment is higher.

Affective care is given by the grandmother, while the mother seems quite detached. Francine spontaneously comments that she has stopped physical

punishment since the first session three weeks ago, and feels very happy to have noticed favorable behavioral changes in the two children, who are described as less defiant. This spontaneous remark makes me consider her great need to please and get others' approval, in this case that of the therapist. She appears to be reporting how she accomplished the "task" I had given her (the task being, of course, to abandon physical punishment because of its counterproductive nature). I sense her need for reassurance and acceptance.

I delineate a therapeutic goal, to strengthen the boundary around Francine and Elaine, to increase each other's external resources so that they are better able to cope. I want to help them consider their coping and parenting skills so that the relationship between parental figures and children can improve. A strong executive subsystem, where authority has the qualities of consistency and congruency, will help the family to function properly.

Art will provide them with an expressive outlet that reduces stress. Art is also a shared activity that can help to strengthen the bonds between mother and children. The therapeutic situation may provide a holding environment for them. Although the main purpose of the session is assessment, I am aware that we are also intervening in the family. I am also looking for therapeutic strategies that could work in the future.

Bernard goes back to the school stereotype. Albert paints the following objects in succession, without relating one object to the next a boat, a spaceship, a helicopter, a robot, a car with a man (Figure 11). His father is driving the car, he

says and he (Albert) will travel with him. Here, he is expressing his longing for his father, and a desire to be with his father. Koppitz (1984) says that only very unhappy children, those overwhelmed by controlling, dominant and disapproving parents, will identify with a robot instead of with its creator. Such children feel like machines that lack identity and that function according to another's demands.

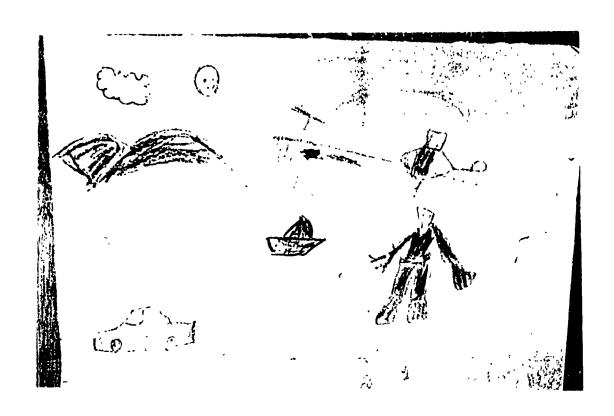


Figure 11

Albert's drawing shows clear signs of progress. The image is richer, with greater investment, and with the compositional elements of the greater use of colour and an attempt to order objects in space.

He seems to be building a vocabulary to communicate with the therapist, using his own language of figures. After observing his mother's drawing, he draws mountains, clouds and a sun, as she had done. This is another of the common behaviors observed with these children. It is probably reflecting identification with stronger figures (Kohut, 1977). Identification patterns are a normal defense mechanism (Kohut, 1977), a need for merger with someone perceived as a stronger figure. There also seems to be a search for a common language and the desire to please. I consider this behavior related to a function of mirroring that these children perform for their deprived caretakers.

Francine has drawn a self-portrait: flowers, a bee, a steaming pot and a bird. Her self-portrait shows a figure with a short body, skinny arms, and a smiling face. She seems to have a good sense of self but low self-esteem.

Carla establishes a sort of a game with me. She asks for a colour, draws a line, gives the colour back to me. I say thank you. She repeats the pattern several times as if it were a ritual. She appears to be asking for my attention, which she does not derive from any member in the family. (The first time I wrote this paragraph I ended the previous sentence with "any other member", implying that I was a member of the family. This choice of phrase may reflect a countertransferential issue - my tendency to get overinvolved with the families). I verbalize my impression about the detached way in which they all interact in this family and both grandmother and mother protest that they have a very good relationship. Elaine expresses her desire to see her sons more often and her preoccupation with Albert's behavior at school. She expresses concern about the possible relation between her detachment and Bernard's withdrawal.

Third Session

After missing two appointments, the same members that came to the second session attend the third. Frank is away, says Francine. She looks depressed and expresses her concern about their financial situation. This is projected into her drawings (Figure 12): empty pots and a snake (in Spanish you have "snakes" when you owe money).

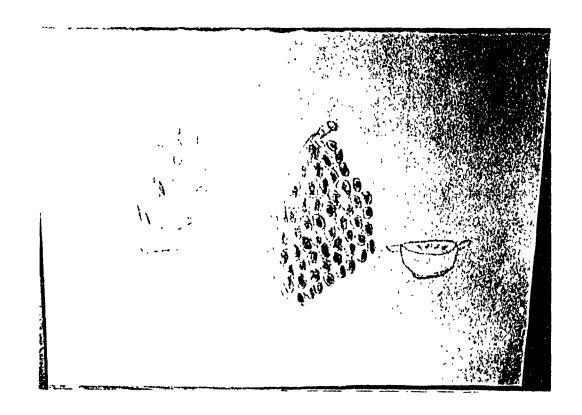


Figure 12

The central image in Francine's drawing (Figure 12) is that of a cluster of grapes. The grape cluster can be interpreted as something bound, and may be referring to her need for binding anxiety. She may be striving to integrate her feelings, to give coherence to her ideas. The flower adjacent to the cluster of

grapes can be interpreted in the same manner. In addition, flowers and grapes are gifts we offer to people when we want to please them. If empty pots are symbolic of deprivation, flowers and grapes may symbolize the opposite, representing an aspiration to a state of abundance.

The children are less excited at the beginning of this session and constantly look for my attention and approval. The session becomes somewhat chaotic as the children start to move around, going in and out of the office without either the mother or grandmother placing any limits. They both stay concentrated on their drawings as if finding in the art task an outlet for their feelings of despair. In this session they have disclosed more details about their feelings of abandonment. Francine's depression seems to have touched the other family members. In enmeshed families stress in an individual has strong echoes in other members (Minuchin, 1974). Francine feels abandoned by her own sons and daughters and Elaine by her two ex-husbands.

A holding environment is created in which these deprived family members can find some support, as suggested by the content and interpretation of Figure 12.

Elaine's drawing (Figure 13) is incomplete and bizarre. She has painted a yellow house that seems solid. She draws straight lines, pathways that lead in different directions, to different places of a playground. One section of the playground, an elevated structure with dangling objects, bears certain similarities to a previous drawing made by Elaine (Figure 6). Elaine's dangling

objects may refer to the activities occurring during the sessions. Elaine may feel like the centre of a mer y-go-round. She may also be expressing her desire to send the children to an amusement park so that they can take part in recreational activities that are outside of their normal experience. Elaine verbalizes her preoccupation about her inability to meet her four children's needs. The finished drawing looks like a very rigid figure in which the house is in the place for a head and the lateral pathways seem to be arms. The whole tigure has the rigid quality of a robot. The lines seem to have been traced with a ruler. The drawing may be reflecting her need to stay in control of the situation.

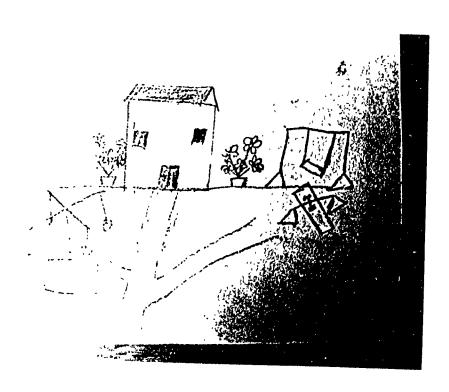


Figure 13

Albert's drawing is an automobile that he coloured in black and outlined in blue (Figure 14). He also paints what he describes as a robot but has the appearance of a pistol (again, phallic imagery). There is also an unfinished duck. When he stops drawing, he folds the paper to build a spaceship, and says it is one of the spaceships on a TV show. I see this as a figure of power for a powerless child (compensation). Bernard, who has again drawn circles in a row, imitates Albert's folding of the paper. Both undo the paper spaceships when they see all the other papers collected on the table.

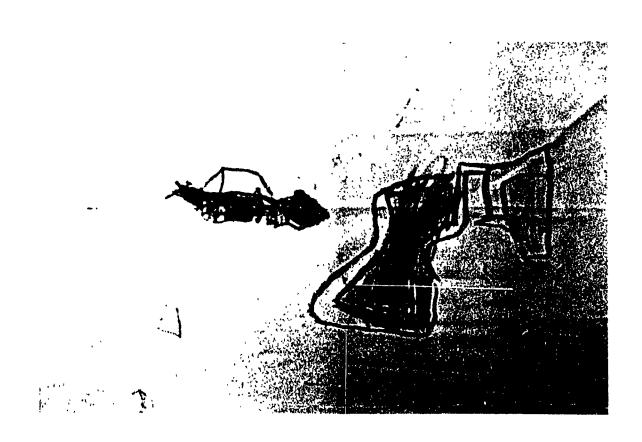


Figure 14

Fourth Session

They have not come in five weeks. The relationship between Elaine, Francine and the boys has strengthened.

Francine looks less depressed. She had stayed with one of her sons in a neighboring city and that is the reason for having missed several appointments. In the meantime Elaine has stayed with her sons.

Francine paints "the house she would like to own" (Figure 15), using more colour than in the previous sessions and this time achieving a composition. Most of the images are coloured (the house, flowers, tree). On the left, however, is a coffin-shaped figure that is outlined in black, lacking any colour.

This monochromatic image, along with the cross-like overlay, evokes death, and may signify Francine's projected final resting place, her last house and home, a coffin. Francine may long to rest, and may feel that the only real way for her to rest is to die.

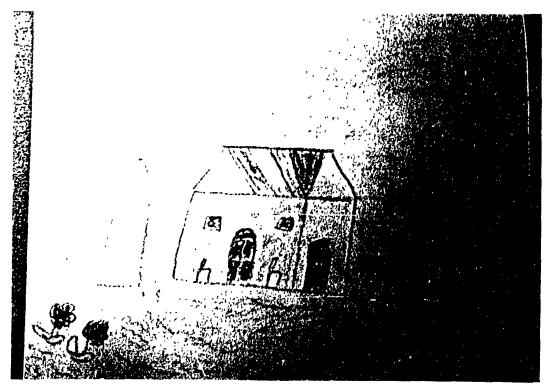


Figure 15

Elaine talks about how skilled Albert is and Albert responds, producing power symbols (Ninja Turtles). There is more investment on the part of Bernard, who continues painting circles and sticks. This time, when he finishes, he seems proud of what he has done and receives his mother's praise.

Carla continues to be highly demanding of attention, physical contact and colours. She takes a piece of paper, paints some lines, scribbles a little, comes back to the table, asks for pointy colours, rejects what I give her, asks for another one until I explain that crayons are not pointy like pencils. Her greediness seems to reveal her deprivation of affection. She is probably re-enacting her frustration in not receiving enough nourishment from her mother.

Elaine drew an umbrella and children hanging from above (Figure 6), describing it as a carrousel with dolls hanging on it. The children had been overactive and as mentioned previously, Carla was very demanding. Perhaps she was depicting, metaphorically, the way she feels about children's demands, activity and noise.

Fifth Session

Bernard's progress is significant. He is self-affirming and pleased with his own products.

The relationship between Elaine and her two daughters is brought up when the girls start to move around. Elaine seems incapable of establishing limits.

There are new complaints about Albert's behavior at school, although reports have been positive for the past two months. He had a quarrel with some peers the day before this session. Albert looks at his grandmother while she complains and goes to the paper and paints a clown, a space-ship and a robot in what appeared to be a response drawing. The robot seems, in this case, a symbol for power and strength. It probably reflects his normal grandiosity: a self-image, depicting a being that is bigger than a child, almost invulnerable and indeed difficult to destroy. But it is also a stiff character, not a dynamic one. He is also offering two different self-images: that of the clown and that of the robot. The clown image may be expressing his fear of being laughed at (of not being respected). The clown image may also illustrate his defense mechanism. Traditionally, clowns cover up, mask or hide their sad feelings.

Francine's and Elaine's drawings again seem to reflect their preoccupation with nourishment and provision of food. There are empty pots in Francine's drawing and men fishing in Elaine's.

They were given an appointment for the next week but the year ended without the family returning for therapy.

Summary

Albert was referred from the HI for assessment because teachers had observed aggressive behavior and suspected maltreatment. What came out in the sessions is that Albert and his brother Bernard belong to a family where the common feature seems to be deprivation of affection. The grandmother Francine,

who is in charge of the children, seems incapable of establishing solid limits on the childrens' behavior, which leads her to use coercive methods. In this case, physical punishment produces different effects on the two children. Communication between Francine and Albert is symmetrical most of the time, while Bernard and his grandmother communicate in a complementary fashion (Watzlawick, Jackson & Beavin, 1967). Physical punishment does not improve Albert's behavior, but instead produces great hostility. When Francine stops physical maltreatment, his behavior improves. Some changes were observed in these two children over the course of the sessions. Bernard was feeling more confident about his own abilities at the end. Albert was less hostile. The relationship between Elaine and Francine strengthened.

The main therapeutic goal was to strengthen the boundary around Francine and Elaine, to increase each other's external resources so that they could better cope. I wanted to help them reflect about their coping and parenting skills so that the relationship between the parental figures and the children could improve. A strong executive subsystem, where authority has the qualities of consistency and congruency, will help the family to function properly. Art provide them with an expressive outlet that reduces stress. Art is also a shared activity that can help to strengthen the bonds between mother and children. The therapeutic situation may provide a holding environment for them. Although the main purpose of the sessions was assessment, I am aware that we are also intervening in the family.

The Francine and Elaine subsystem was strengthened and greater involvement of Elaine with her two sons was achieved. They gave each other mutual support, with a diminution of stress and hostility in the family and the cessation of abuse. Communication patterns were also dealt with, and a basis for clearer communication was established. The therapist collaborated in conflict resolution. A stronger relationship between the two persons who perform the parental roles for these children would provide appropriate leadership of the system and increased nurturance of the children.

<u>Mary</u>

Description of the family

Mary, age 6, lives with her grandmother Patrice, age 54. Living with Patrice are three of her single daughters and three married sons with their families. Nohora, age 20, Pat, age 18 and Chris, age 15, are the three daughters.

Mary was born from Nancy, age 26, and Oscar, age 28. Nancy and Oscar separated when Mary was three months old. Oscar took Mary to his mother's home. Soon afterwards, Oscar remarried and took Mary to live with him. A mutual friend informed Nancy that the child seemed malnourished and was probably mistreated. Nancy decided to take the child to live with her, but because she had severe financial problems and had formed a new family, she returned Mary to Oscar's mother, Patrice. Nancy now has three more children and is separated from her current partner. Patrice's husband abandoned her last

year, after 35 years of marriage. Patrice gets temporary work as a housemaid or doing laundry for other families. Oscar has an unstable work pattern. Lately he has been working as a huckster at the public market. He visits Mary almost every week. When I saw Mary for the first time, she had not seen her mother in three years, although they live in the same city. Stressors in this extended family are many: low income, overcrowding in the house, few opportunities to find work.

Mary is disciplined mostly by physical punishment (beating with objects). The grandmother is the head of the family and plays the maternal role but she is often working out of the house. In her absence, the other women in the house assume the maternal role and maltreat Mary. Allocation of power is distributed among the different adults in the house. Rules are inconsistent and Patrice is often unpredictable.

Mary has been attending the preschool for three years. She was referred by the HI because of abnormal behavior. The teacher reported that Mary is usually withdrawn, whiny and has little frustration tolerance. She has frequent tantrums and bursts into tears very easily. HI suspects serious neglect and maltreatment. Her physical aspect (dry skin, dry hair, pale complexion, low weight and height) made the teacher suspect malnourishment. The grandmother was asked to take Mary to the doctor but she has not done so, arguing that she has not had enough money for the medicines the doctor will prescribe. Other members of the family seen in Art Therapy assessments did not look malnourished, which inclines me to suspect serious neglect.

Mary, as the identified patient, was scapegoated by the family and was a target for the jealousy of one of her aunts. Mary's presence in the family meant that there was one more mouth to feed. Mary is required to perform adult roles she has to sweep and clean the dust in the living-room, for example. Maltreatment has made of her an insecure, withdrawn girl with a large need for nurturance, someone who would seek any kind of attachment and develop dependent relationships. Her behavior, including anal aggression, can be seen as a symptom of the repressed hostility she feels for being abused. She has a poor self-image and hidden fears and responds with hostility.

Art Therapy

As with the other families, Mary's family was scheduled once a week. I saw them four times, with an interval of a month between the first two and the last two sessions. I saw different members of the family in each session. It seemed that the family system maintained the idea that Mary was the problem, the one who needed to come, and adults came mainly to accompany her. I saw Oscar, Nancy and Nohora one time each and Patrice twice. I always insisted on the importance of all of them coming to every session.

Mary's imagery evolved significantly through the different sessions. Her early drawings seemed to correspond to a school stereotype, the kind of circles and sticks in a row that precede writing, very similar to Bernard's drawings. Then she looked to the artwork of her grandmother and her father for inspiration. Initially these attempts at duplication were scribbles, but she eventually came up with formed figures and an extended use of colour.

There was a transference drawing in the last session in which I asked for a family drawing. Mary drew "the doctor" (the family referred to me as the doctor because it is the custom, not because they knew I was a medical doctor) in front of another figure, "patota", that represented her fears. Mary was increasingly self-confident and ended feeling proud of her products.

Patrice produced a total of two drawings (sessions 1 and 4). She was quite concerned about her art skills and had difficulties talking about what she produced. There was a good investment of energy in her drawings.

Oscar produced two drawings (session 2) in which his main concerns seemed to be his oral needs and his relationship with Mary's mother. When Nancy (who had not confirmed her attendance at the session) arrived, he started to produce bizarre configurations in his drawings. His use of colour was limited to blue and red although he used all the space on the page. His drawings had an infantile quality.

Nohora produced one drawing. I would say that she seemed the healthiest in the family. Her drawing was less infantile than those of the other adults I saw in the family. She drew a landscape: house, tree, clouds, birds, the sea with fish and a fence. This fence, drawn at the end, seemed to represent her ego-defenses. She was protecting herself from disclosure.

Nancy produced one drawing on a sheet that she shared with Mary. It was a house with a big curved roof outlined in pale blue.

Process of Art Making

Mary.

Investment: Mary was enthusiastic about the art making. At the beginning she did not seem to have enough energy to finish colouring her images. Some of her drawings ended up unfinished. She was pleased to have a whole box of crayons for herself and would draw for most of the session time. She did not ask for assistance but did check with the therapist for reassurance. Although the paper was on the table and I had explained from the first session that they could use as much paper as needed, at the beginning she would use both sides of the paper. When she decided to ask for more paper, she discovered with joy that she could use as many sheets of paper as she liked (symbolic nourishment through the materials). As she was not verbally expressive and had a mild language disability, art constituted a valuable means of self-expression.

Affect: Mary's affect also evolved through the time I saw her. At the beginning she was quite withdrawn, made no eye-to-eye contact, was nonverbal and sometimes seemed fearful and hostile. From the second session on, she started to relate to me in a different way, calling me by my name despite her father's reproach (she was supposed to call me "doctora"), and seeking physical contact.

Self-confidence: She never expressed concern about her skills and seamed rather proud of what she was able to produce. Her need for reassurance from the therapist, though, revealed her insecurity.

Patrice.

Investment: She cooperated with the tasks but did not enjoy drawing. Her lack of enjoyment was related to poor self-confidence in her art skills and her view that art was "children's stuff".

Affect: She was hostile in the first session, rude to Mary.

Self-confidence: Patrice was very much concerned about her art skills. She was not eager to talk about parenting skills.

First Session

Only Mary and Patrice come to this session. Patrice seems anxious, controlling and hostile towards the child. Mary is withdrawn and silent, making little eye contact and avoiding any verbal communication.

After explaining what the sessions will be about and why Mary was referred by the HI, I ask them to do a free drawing.

Mary starts drawing circles and sticks (Figure 16) in a row while Patrice paints an egg-like figure in the center of the page. She fills in the figure with red (Figure 17). She describes it as a "delicious fruit", maybe a pineapple (piña) or an apple (manzana). The object has a surface that resembles the former but has the colour of the latter.

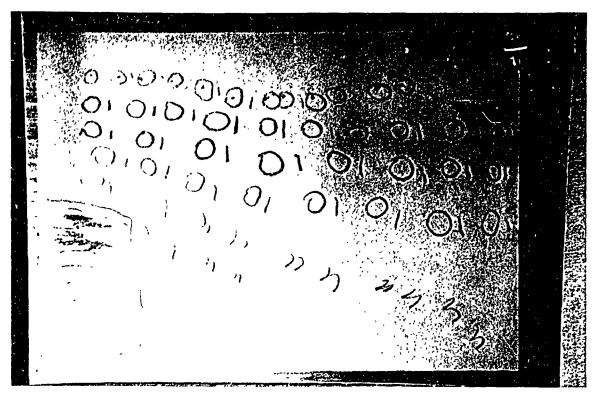
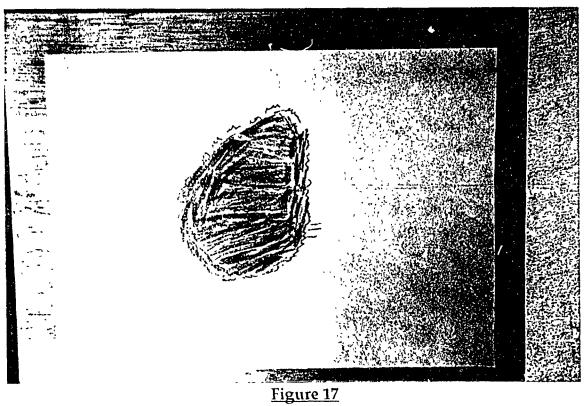


Figure 16



Maybe Patrice is depicting her oral needs. The surface of the figure is sharppointed. My feeling was that she was expressing hostility, which could have
been an association with the affect she displayed or an interpretation of sharppointed surfaces as symbols for hostility.

Mary uses several colours, a coloor for each row of circles. After looking at her grandmother's drawing, Mary attempts to draw a similar object [as in Albert's family, identification with the stronger figure? (Kohut, 1977)].

Mary also uses a red crayon, paints a square frame, draws parallel lines inside, tries to colour the figure and quits. She seems preoccupied with trames (boundaries?). She turns the page over and tries a larger square in yellow but it also ends unfinished. They both look like containers. But there is not much inside, as if they were depictions of emptiness, of deprivation.

There is no spontaneous self-association with the products and as Mary does not seem to feel confident about what she has done, products are not discussed.

Patrice talks very little about the drawings. The issue of physical punishment is brought up when Patrice complains about Mary's behavior. She explains that she does, indeed, punish the child by physical means, but thinks that the only one at home who is really rude with Mary is Patrice's daughter-in-law. As with the other cases, I describe the consequences of maltreatment for the child and make a request that physical punishment stop.

Second Session

Patrice does not come. She sends a message that she is working. It seems that the fact that Mary was referred for therapy has alarmed the family, and Patrice has decided to stress that Mary is her father's responsibility. So, if something is wrong with the girl, the father should assume his parental role. (The message seems to be that if someone is "guilty" it is not this burdened grandmother.)

The relationship between Mary and her father is warm. This time she engages in drawing with enthusiasm, using different colours, trying to copy her father's pictures. He has drawn a frontal view of a red table in the middle of the page. There is a red flower pot on the table. Then he draws a similar figure to the left, this time in pale blue and there is a more detailed attempt to create a formed expression. The flowers of the second pot are more detailed and show Oscar's skill at drawing. His images have a transparent appearance. I have the feeling he is trying to beautify the situation, to avoid guilt and deny that anything is wrong.

Fifteen minutes after the session begins, Nancy arrives. She has received a note from Patrice telling her that they had an appointment in the clinic.

Oscar starts to fill the page with bizarre figures (Figure 18) that look like ribbons, snakes (women have been compared with poisonous snakes since the paradise myth), while Nancy expresses her anxiety and approaches Oscar in a seductive way. He is probably doing a response drawing. She asks why she had to come. She had to ask for permission from her place of work, and this causes trouble. What is wrong with Mary? (Her anxiety can be explained by noting that, in this culture, referral to a psychotherapist occurs only in cases of "craziness".)

She continues asking questions. Why does the child look so pale? Why is her skin so dry? Why is she so skinny? Oscar replies, shyly, that she does not have the right to demand answers to her questions, because she has not seen Mary in three years. His tone is accusatory.

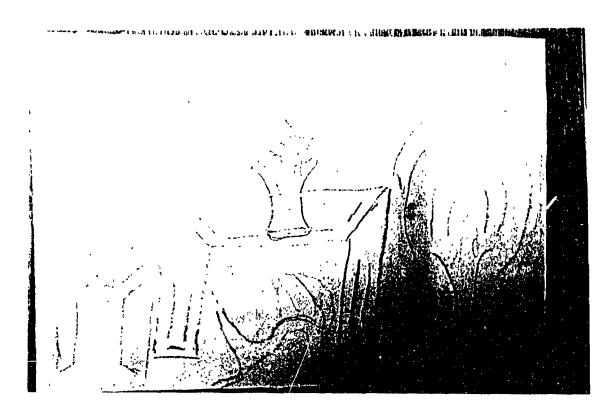


Figure 18

Nancy makes several attempts to get Mary closer to her. She tries to hug the child and Mary resists weakly, looking into her father's eyes for reassurance. Mary looks angry. When I explain what the session is about, Nancy calms down. I ask her to do a drawing. She picks Mary up and seats the child—esides her. I ask both of them if they want to share a paper (symbolically, I am asking Mary if she wants to open a space to her mother). Mary accepts but does not seem happy to do so.

I understand that the system they belonged to when they were a family does not exist any longer, and that the mother is now peripheral to the family, but I consider it important to foster a relationship between mother and child. I am not trying to restore an old system. Rather, I am trying to break the rigid boundary that keeps the mother completely out of the system. It is healthier to have a permeable membrane around them that lets the mother in and out without much disturbance of the system and offers Mary more affective resources.

Oscar starts a second drawing, while Mary takes a black crayon (black has been associated with negative feelings, mainly depression; maybe the child has not completely processed the loss of the mother, maybe she is re-living the loss because of her presence).

Mary draws a big black frame that occupies the left half of the page (Figure 19). She is probably marking her space and rejecting her mother as an intruder. The frame line in the middle of the page is stronger than the other sides, again symbolizing the boundary she wants to keep between her and her mother. Nancy, using the other half of the page, paints a blue house with a large curved roof, one window and a triangular door. A path leads to the door. The house is bordered by two trees. As in other adult drawings in this study, there does not seem to be a correlation between colour and object [which, according to Lowenfeld (1964) children achieve around the age of seven]. Mary, after observing her mother's drawing, draws some lines on top of the frame, resembling a roof and thus transforming the black square into a house.

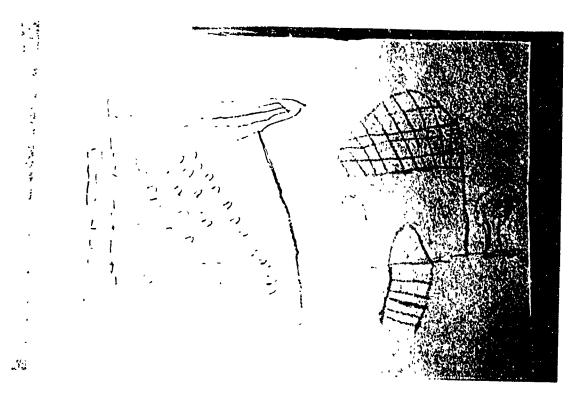


Figure 19

An argument erupts between the mother and father. Oscar says he is planning to take Mary to live with him and his wife next year. Nancy says she does not agree and turns to me to explain that she is afraid Oscar's wife will maltreat Mary. She even says that she intends to regain custody of Mary.

Oscar expresses what he feels about the issue in a drawing (Figure 20). He paints another table in the center of the second paper. A male figure stands to the left, leaning to the side as if he were going to fall down (he probably feels his relationship with Mary is threatened by what Nancy is saying). Two female figures are drawn on the right side. Afterwards, another table is drawn over the first one and lines cross over the figures at the bottom of the page. Oscar writes down his name in the middle of the page. He describes the drawing as representing a picnic at the beach.

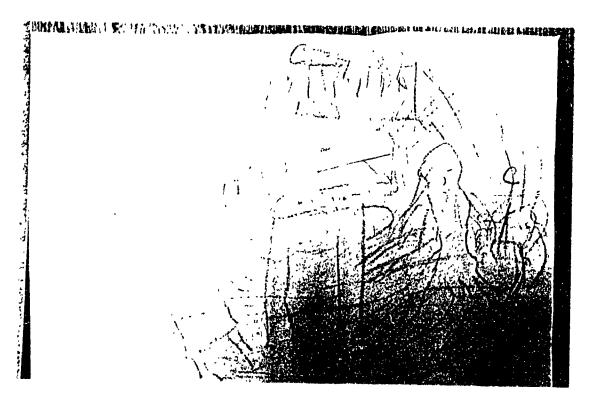


Figure 20

He says the male figure is himself. Only one of his arms is visible, so he cannot hold the figure in the center. Mary is one of the female figures and has no arms (which Oscar realizes while he is talking but does not try to add them) and she seems to be melting into the bottom. The other figure is described as his younger daughter but only a big face with a sad expression is visible. He says that a large wave swept everything away, the bottom table, which was empty, as well as the upper table which had the food.

The two tables seem to form the lower half of a female body dressed with a skirt, standing in the middle of a whirlpool and holding both male and female figures, while the upper table with the food seems to be in the place for breasts.

He is probably depicting his oral needs, as well as a mother figure that he perceives as enormous and nourishing but menacing. He is also probably depicting the seductive female, which corresponds to Nancy's attitude during the session. His current stability is threatened.

A discussion between Mary's parents ends with an agreement. Nancy will try to see the child more often, Oscar will talk with Nancy before taking Mary to live with his new family. They are both aware of having been neglectful, which has been a spontaneous conclusion with no intervention on the part of the therapist. The fact that they had been appointed for therapy has made them realize that they should assume greater responsibility for their child.

I ask Mary to talk about the drawings. (Although our culture says that adults always go first, I ask Mary to take the first turn. The message is that although Mary is just a child, she is important and should be appreciated and respected). She asks her father to talk about the snake or ribbon-like figures. He says it is "decoration". Then he looks at Nancy's house and depicts it as a "casota" (a very big house) in an amused manner. I suggest playing on the paper, walking with the fingers to and from the house, by the pathway, knocking on the door to see who is inside. I want to propose a solution to her ambivalent feelings by using a metaphor, that she can get closer to her mother if she wants to. It's up to her. She can express, through the metaphor, her need for the mother, her desire to "belong" to her house, without receding from her anger (which I accept) towards her mother for abandoning her.

By the end of the session, a good rapport has been established between the therapist and the child and Mary's resistance towards her mother has diminished. Both parents agree to come back in a week to continue negotiating Mary's care.

Three weeks later, after having missed an appointment, Nancy comes alone, sure that she will find Oscar, Patrice and Mary in the clinic. She explains they have not come to the sessions because Oscar has been ill and Mary has not been attending school because Oscar has not been able to pay the monthly fees. She says that she has been visiting the child regularly. Because nobody else arrived, I make an appointment for the following week.

Third Session

Mary comes with her 20 year old aunt Nohora. Mary is in a joyful mood. She seems to have a good relationship with her aunt. For the first time she relates the drawings to herself. She refers to the figures she has drawn as "my dog", "my sun", "my bird".

Nohora draws a landscape: a house, a tree, clouds, the sea with fish and a fence. Neither she nor Mary say very much about Nohora's drawing. But Mary repeats the dog figure on Nohora's paper, symbolizing her willingness to share space with her and also the warm relationship existing between them.

Nohora complains about Mary's behavior at home, asking for counselling.

"Mary makes for eight", she says, laughing. She is enurethic, she plays with

faecal matter, she cleans herself after discharging her bowels with the bathroom curtain instead of asking for toilet paper. (She has to ask for it as it is not kept in the bathroom). Maybe she is manifesting her anger against the people who do not provide her needs and on whom she depends so much.

From what Nohora says, it is also inferred that authority is not allocated on a specific person in this family system. Limits are neither clear nor applied consistently.

Mary has continued to have contact with her mother. Nohora expresses her desire to stop taking Mary to her mother's place, because, she says, she considers that it is the mother who should pick Mary up. I ask her what kind of arrangements could be made, given the importance of maintaining the relationship between mother and child. When asked, Mary expresses her desire to continue seeing her birth mother. It seems that there is a family collusion to maintain the mother as peripheral.

Fourth Session

Mary and Patrice come to this session. Patrice complains about Mary's behavior. The morning before the session she had a tantrum because she lost a cherished object and she felt Patrice was responsible. The girl constantly checks out my reaction toward Patrice's words. Patrice says that "she had to beat" Mary. I insist that she could have found a different way to deal with Mary's behavior and express my disapproval of physical punishment.

Mary draws while her grandmother talks. Using the same kind of circles she drew before, she builds up a figure with a circle for a head, another for the chest, another for the belly, and several other circles to form arms and legs. She fills the circles with colour, except for the head and then draws facial features: a big mouth and little eyes and nose. This is the first time in these sessions that Mary fills in a figure with colour and it is also her first complete figure. She is very proud of what she has done and although she has difficulty explaining what she dr w, it finally becomes clear that she has drawn a Ninja Turtle. After we talk about the drawing, she paints a tiny figure in the bottom of the page and says it is a mouse. It seems that she is pertraying an ambivalent self-image: a powerful and still small and vulnerable image like a Ninja may stand for her normal grandiosity as a child. The mouse, which will be repeated in the next family drawing, may stand for her feelings of fear and "smallness".

As some issues related to family function came up, I ask them to make a family drawing.

Patrice produces an infantile drawing (Figure 21). All the figures look alike except for the fact that some of the figures are green and others are blue. There is no clear distinction of sex or age between the figures (problems of identity, common in an enmeshed family). In an upper row she paints herself, her husband and Nohora (the executive system?). In a lower row she paints two figures. She titles the drawing and writes down "papa, mama y los niños" (father, mother and the children). Curiously, she has included her husband, who no longer lives with the family, and symbolically includes Nohora in the parental

subsystem (she is probably symbolizing a former triangulation). The other two children are her single daughters. She has probably not worked through the loss of her husband and the old family system, which may reveal rigid and maladaptive coping mechanisms. She has not moved to a new stage of the family cycle. (Her daughters are not children any more, even if they are still single and dependent). The drawing may also reflect her ambivalent feelings towards Mary as she has just talked about loving her as her own child although none of the children in the drawing is Mary.

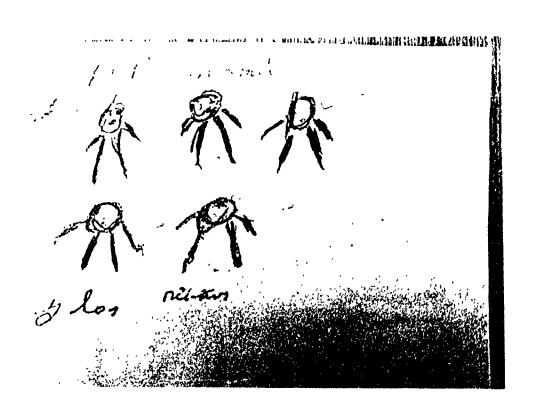


Figure 21

Mary has not included her grandmother in her own drawing. She paints several figures: her teacher, the therapist and "la patota", which are the more formed figures, and then tiny matchstick figures representing mice (children at home? children at school? her own perception of children in front of adults?; mice are small, vulnerable fearful beings who have to steal food because no one will provide for them). "La patota" represents a masked figure that she saw in a carnival. This is a scary figure and may thus represent her fears. As mentioned earlier, she also represents her transference to the therapist by placing her in the drawing in front of what symbolizes her fears. "Transference wishes or fears may be represented in more or less disguised ways, as in beautiful or ugly pictures of the therapist or another authority figure" (Rubin, 1984a, p. 56). This can be related to the conversation with the grandmother at the beginning of the session: the fear of the abuse and the wish that the therapist can help stop it. Mary expects that her need for love and protection will be fulfilled by the therapist.

Again the grandmother asks if it is really important that Mary continue seeing her mother. I sense that there is a secret reason for this resistance to maintain the relationship. This possibility would have to be explored in further sessions if the family decides to continue in therapy next year.

This was the last session with Mary and her family. They were also supposed to return after the Christmas holidays but they did not and a follow up could not be arranged with the agency.

Summary

Mary is a little child who has had a transient way of life. She has been chronically deprived of affection and physically neglected by her caretakers, her grandmother and aunts. She has been repeatedly abandoned and neglected by her caretakers. Mary is frequently punished by physical means and receives harsh verbal treatment from her grandmother, who seems also in need of nurturance. Her mother has been peripheral and her father has a disengaged position. Mary acts out her needs at home and at school and portrays her fears in her drawings.

I formed a picture of a family that had too many stressors, where all the adults had little preparation for parenting, where the grandmother has recently suffered a major lost (husband). The family portrait by Patrice reflects part of the family structure, in which one of the daughters plays a parental role, the grandmother has not completely worked though the loss of her husband and there does not seem to be a clear differentiation between the various members c the family.

In Mary's case I think that the child's self-esteem increased through the sessions and the advocate role of the therapist may have diminished some of her fears and guilt. Her relationship with her mother was reestablished and thus sources of emotional nourishment increased. Her attempt at representing self-images at the end may indicate an increased sense of identity (differentiation of self).

Grace

Description of the family

Grace, 10, has been living with Helen, 30, Ignacio, 33, and their three children Leo, 10, Mia, 8 and Carlota, 6, for six months. She was born from Narda who gave her away to a friend who adopted Grace when the child was a year old. After eight years, the mother reappeared in Grace's life because the foster mother called and asked her to take Grace away as she could no longer deal with Grace's behavior. Grace lived with Narda and her new family until Narda concluded that she could not cope with the child and so came to the clinic and asked that Grace be placed in a foster home. Narda came in with two brothers of Grace's biological father. Narda, who now lives in Venezuela, insisted that she could not have Grace with her, that she hated her and that the child seemed to be crazy.

After evaluation and determining that Grace had been severely abused, the clinic team decided to place Grace with one of her father's brothers, Ignacio, and his family, and arranged that the mother send money every month to cover some of the expenses. Ignacio has a temporary job as a stevedore, earning minimum wage. Helen stays at home with the children. Grace has no relationship with her biological father.

So far, Grace has never been in a school. Not much is known about the kind of life she had with her foster mother, but severe maltreatment is suspected. Her current foster parents have had problems in setting limits and felt they could not

discipline Grace, so they moved her to an uncle's house for a while. The first time I saw the family they had come for an interview with the social worker, willing to arrange for the uncle Mario to be the new foster father, as they felt she respected him the way she did not respect them. The social worker wanted me to assess the family before making new arrangements for Grace.

Mario, 50, is an authoritarian man who belongs to a religion that strongly believes in harsh punishment, including hitting with objects (usually a belt) and that is why the Grace "respects" him. It was clear during the first interview that Grace would not do anything without the uncle's approval (she would not draw after Mario said he would not) and that she was fearful of him. Because of Grace's long history of abuse, neglect and transient life style, it was decided that she will not be placed with Mario. Grace was to remain with Ignacio and Helen. They would receive support (counselling and therapy if necessary) from the clinic. After this first session I saw Grace and Helen three more times for assessment over a four month period, while they were also undergoing family therapy with a social worker.

Art Therapy

I saw the family four times in four months, although they were supposed to come once a week. Ignacio, Helen, Mario and Grace participated in the first evaluation session. Only Helen and Grace continued to attend.

Grace established rapport with the therapist when she was seen alone after the initial interview. In further sessions I felt that something was interfering with her progress. The social worker who was also seeing the family had a very different approach to treating Grace, occasionally being authoritarian with her as if that would permit her to establish limits. I saw the social worker getting really upset with Grace because she refused to talk. Most of the time Grace was mute, refusing to answer even very simple questions. The child was quite hostile and mistrustful. Some of Grace's images made me suspect that she had been sexually abused in the past. I informed the social worker of my suspicion.

Grace displayed a preoccupation with doors. In her first drawing of a house, the door does not touch the ground. The second house has an enlarged door, the third is the only green detail in a blue and red drawing and the last one is black and crossed by a horizontal line. There seemed to be a tendency to enlarge figures in her last drawing. These objects including a door, the trunk of a tree, a female figure's foot and a window. Is she enlarging what is most significant for her? Doors may represent body apertures like genitals. Is there a representation of an enlarged genital after penetration?

Most of the time Grace limited her use of colour to red and blue, which culturally, represent opposites, the good and the bad. Her colour use may represent her ambivalence and her splitting.

Helen was very much concerned about the change that was taking place in her family with this disturbing new member. She always looked overburdened. She was usually warm to Grace but looked frustrated when she could not get a reciprocal response from the child. The presence of this new member means a risk of dysfunction for the family. Her drawings displayed her preoccupation about family life and her hopes of finding, in religion, the support she needed in order to be able to cope. Her representations are very much that of an idealized family, in which children ask for permission and obey their parents immediately. Family activities are all-important for Helen. She seems to project what she teels is her mother's role - to unite the family helped by her belief in God.

There seemed to be a conflict-avoiding transactional pattern between Helen and Grace.

First Session

Grace refused to draw the first time I saw them, after her uncle Mario said he would not paint [identification with the aggressor in search of psychological safety? (Johnson, 1987; Kohut, 1977)]. Ignacio and Helen made their free drawings while Mario talked about his expertise in child-rearing. Grace looked at the floor and answered questions only by nodding. Ignacio and Helen looked insecure and fearful of the older brother who seemed so competent to them.

Helen used a green crayon to draw a small church with a big cross on the roof and the family leaving the church after attending Mass. She talks about the family leaving the church but only two match-stick figures (mother and father)

are drawn beside the church. The other people are still inside the church, she says. The church also represents the good, her desire to be a good mother, perhaps. She may be experiencing a conflict between rejection she may feel from an unwanted, disturbing adopted child, and guilt because when feeling such rejection she is not behaving according to religious commandments.

Ignacio draws his wife's face on the right of the page. Both Ignacio and Helen use very little space on the paper and only one colour each. There is no correspondence between colour and object. There is not much enthusiasm in the process of creating the drawings. They do not seem to enjoy the art tasks, probably because they feel tested and insecure about having to perform in an area in which they lack appropriate skills.

The social worker was a participant observer in this session. She limited her participation to trying to establish some rapport with the child. After the family left, the social worker and I discussed the case. It was evident that Ignace and Helen felt overwhelmed by the new responsibility and the presence of Helen had disturbed the whole family system. They were trying hard to cope with the new situation but lack the necessary resources. Both Helen and Ignacio were warm with each other and with Grace but felt incompetent in the presence of a brother who could achieve what they felt they could not. Mario, Ignacio and Helen were seen separately by the social worker while I had an individual session with Grace. The social worker reassured Ignacio and Helen that although it was not going to be easy, they were the preferred foster parents for Grace, because the girl needed their love and had had enough harsh treatment.

Grace was more relaxed alone. She seated herself beside me and agreed to make a conjoint drawing. I suggest a game (mirroring). She would tell me what to paint and what colour to use and I was going to do a line, she the next. She wanted a house so I drew the first line, and so forth until the house was completed. Continuing in this manner we drew a house, two figures, clouds and rain (Figure 22). She ends the drawing by placing some grass around the house and a sun and a moon (again the sun and the moon, again symbolizing ambivalent teelings?).



Figure 22

has heard from her own birth mother. This could also be a representation of a need to build a proper boundary to contain her thoughts. She may be scared by her own hostility. My supervisor at Concordia suggests that roofs traditionally represent the phantasy area and that given the circumstances, Grace may not be clear about reality and phantasy.

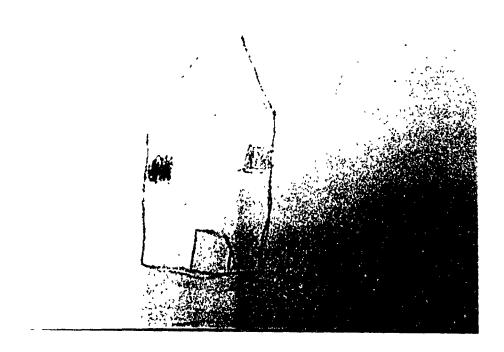


Figure 23

Helen has again drawn her family. They have finished lunch and are coming out of the house. Her husband, their three children and Grace walk down the path. Helen herself is located to the right of the drawing, separated from the others, watering the flowers.

I wanted to indicate to her, through symbols and metaphors, that she could count on me. Levick (1975, p. 205), in talking about transference in Art Therapy, states that: "It... seems that the Art Therapist's willingness to draw with the patient reinforces the therapeutic alliance." Grace verbalized a little and told me that she did not want to continue living with Mario. She expressed a desire to attend a school and to see her former foster mother again (attachment to the abuser).

Second Session

Helen arrives and says that because Ignacio is working he can't come to the sessions. Grace's mood is very different from the last session. She looks happier and verbalizes much more. Helen feels they all have progressed. Grace is behaving better and the rest of the family is adapting to her.

I ask them to do a free drawing. Grace's first drawing is the outline of a house with one door and two windows (Figure 23). One of the windows is filled in with red [Malchiodi (1990) describes the use of the colour red on a door or entry way to a house as a recurrent feature in cases of sexual abuse. Sobol (1982) suggests that red in the window means fire inside the house.] The other window, filled in with yellow, Grace describes as curtains. Five flowers make up a garden to the right of the house. Above the flowers a very pale sun shines (just the outline). An element that recurs in Grace's drawings is a preoccupation with roofs. She always seems to have difficulty drawing the roof. She repeats the lines or finds that the roof she drew is larger than she wanted. It seems to me that this can be related to her own preoccupation about being crazy, a statement that she

The dining table can be seen inside the house as if the house were transparent. There is little food on the table (her need for nurturance). Helen is probably concerned about boundaries (the house has no front wall) now because she had to open her family system boundary to include a new member. As during the assessment sessions, painful issues are disclosed - her difficulties coping and adapting to new situations, her limited resources, etc. The drawing may also reflect her feeling of being exposed. She is also expressing her desire to separate from the family or her loneliness, which we discuss in the session.

Helen denies any negative feelings, talking about the comfort she finds in religion but still displaying a depressed mood. She suggests that her husband is not pleased that Grace is in their home. Helen reports this while trying not to hurt Grace's feelings. Helen and Ignacio are concerned about Grace's behavior and fear that she may be a negative role model for their own children. Several days before this session, Grace played a game with her foster siblings in which she, in the role of the teacher, punished the "bad children" by making them kneel down on the floor on the caps of soft drink bottles. She was probably recreating a situation she herself had experienced in the past. When talking about this, Grace did not display any visible reaction. Interaction between Helen and Grace in the office is minimal.

They comment on each other's drawings. The praise Grace receives from Helen seems to encourage her to ask for another sheet of paper and to ask what they'll do next. Grace still displays mistrust but has established enough rapport with the therapist to ask for some nourishment (symbolized in paper).

I ask for a self-portrait. Helen uses more of the paper this time than she will over all of the sessions. She paints a large female figure, broader than she is (Figure 24). She has a lot of trouble drawing the arms. The result is two short and skinny arms that match the slim legs but contrast with the wide neck and big heart-shaped chest. The figure's facial expression is ambiguous. Is she sad...smiling...surprised? Helen seems to have a good self-image although she does not know how to "handle" the situation (therefore she does not know where to place the arms; as a result they end up being weak and inappropriate to handle things) and feels that she does not have strong support (weak legs).



Figure 24

Grace has drawn a landscape that includes a house, a tree, flowers in two rows, an empty sun, a house and two figures in a blue-green colour. Then she adds two more flowers, in yellow, different from the others, as well as a black figure, to the right, in lined to the left. She is the girl in front of the house, she says, the larger figure with longer legs, more hair, and no mouth. (Her mutism is graphically expressed. Could that represent her secret: physical and sexual abuse?). The tree has a strange shape: a rectangular trunk that she enlarged after finishing the tree and a top that is similar to hair, or like waves created when one drops a stone into a body of water.

The house is a small one, with no windows. The door does not reach the ground. Grace cannot relate the drawing to herself. When asked to tell a story, she would not comply. My Canadian supervisor suggests that this communicates good ego-strength in response to her foster mother's inappropriate judgmental statements about Grace's capability in her future role as a mother.

Third Session

After four weeks of missed appointments, Helen and Grace appear for a third session. The social worker has seen them a couple of times in the meantime, and has told me that there has been improvement in the family situation. But Grace is again withdrawn. She refuses to talk and there has been a deterioration in her physical condition. She has lost weight and looks pale. Helen expresses her concern about Grace's nutritional state, saying that their family income is so low that they have not been able to offer the children proper meals. She views Grace as a burden. In some way she is expressing her feeling that Grace is taking away something that properly belongs to their own children.

They both look depressed. Helen looks exhausted. They say that they missed the appointments because they did not have money for transportation. It seems to me that they expect more out of the sessions with the social worker because she is arranging a place for Grace in a school, and is completing the paperwork required to make Grace's biological mother send the money she promised to send.

They are asked to try to express their feelings in a drawing. Grace waits for Helen to start and only then decides she is also going to paint (Does Grace need comeone to validate her action? Is she afraid of doing something wrong? Is affiliation involved?)

Helen draws a Christmas tree (it is December) and children receiving presents (Figure 25).

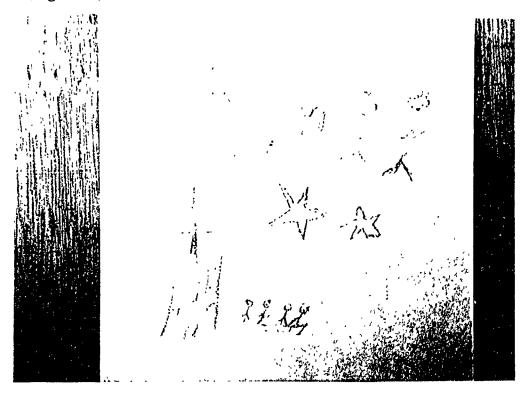


Figure 25

Grace draws a house and a tree and then converts her tree into a female figure (Figure 26). The trunk has become a strip of fabric with buttons and the top has become a head with shining hair. There are no clearly recognizable facial features. The head and body are surrounded by waves (like electric waves) that give the impression of luminosity, of something that may explode. She also adds two sticky arms with two large and round hands with six fingers on one hand and seven fingers on the other. The hands may be representing the abuse she has been victim of as well as her own anxiety and hostility.

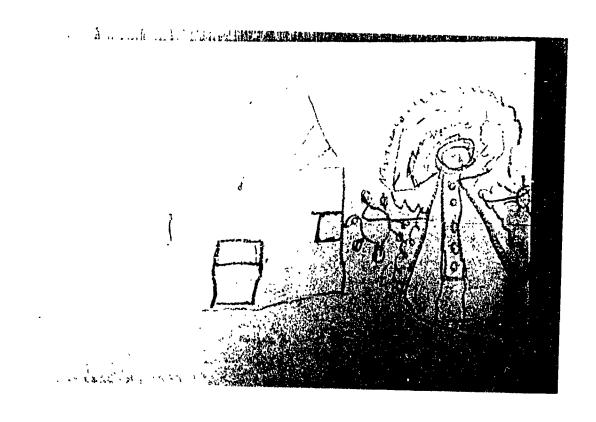


Figure 26

The tree trunk has been enlarged with a red square located in what might be the genital area. The house door and roof have also been enlarged. There is a red bulb over the door. (Red bulbs are cultural symbols for houses of prostitution). It seems that she was recreating the whole abusive situation she lived in with her former foster mother. The social worker is informed about this impression and an examination of her former life is recommended.

Helen has added three stars and a church to her previous drawing. Her three children and Grace are represented as arriving at the church. Now she says that the figures beside the tree are not the children but herself and her husband giving presents. There is only one box representing the presents (they want to share and give, but do not have very much to offer). The Christmas tree has several pointy edges which may represent Helen's hidden feelings of hostility. Helen's drawing, with the identification of characters, the integration of characters and objects, and the description of a sequence of events, has a story-telling quality.

Fourth Session

This time Helen comes very well groomed. She looks happier than in previous sessions. I ask them for a drawing.

Grace again paints a house, one very similar to her previous house (Figure 27). This time the roof is detailed with lines, and is not cut off by the upper edge of the page. The windows have a grate cover this time, which makes me suspect that her defenses are up.

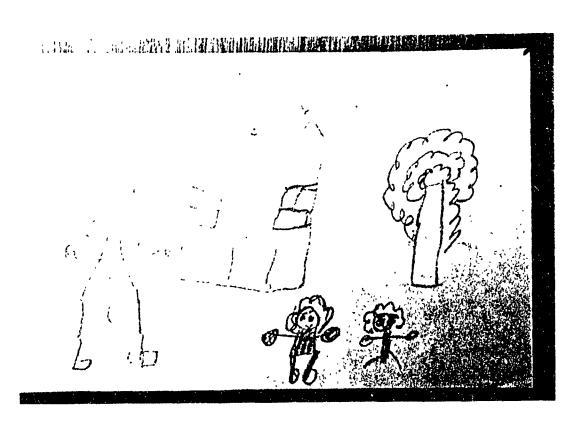


Figure 27

She paints a big woman that appears to be very close to the observer. The woman's arms are extended as though she is inviting a hug. She has coloured cheeks (representing good health?) but no mouth. The slimmest part of the body is the chest (so this woman cannot probably perform her nourishing role). There are two children in front of the house. Grace says that the mother is calling them for dinner and explains that she has included her neighbors. The children look masculine but Grace explains that they are two girls (reflecting problems of gender identity?). The children are the only elements that she filled in with colour. She uses blue and red, as she had in a previous drawing, colouring one

child in blue and the other in red. The red child appears to be smiling, while the facial features in the blue, smaller child are overlapped and it is impossible to determine the expression. The larger red girl seems to respond to the mother's call. Cultural stereotypes associate red with bad, evil qualities, while blue stands for good, saintly qualities. Grace's use of these colours may represent several dynamics - a splitting of herself, a desire to express her true self (Kohut, 1971; Miller, 1981), as well as a desire to integrate the "good" and "bad" components of her self. Despite the demeanor that Grace displays during the session, she may be expressing not only her love needs but also her willingness to respond with love. Grace may also be denying the abuse that she has been subjected to, the abuse that characterized her former life, the abuse that she has never talked about.

Helen draws a teacher giving out end of term reports in front of a table where two children are standing. There are three pathways that lead from the school to three different houses. Three children, three paths, three houses. Is she representing a triad now? Is the relationship between herself and her family now triangulated? She tells a story. The three children, having received their reports, now go to their own homes. Is she perhaps talking about different subsystems and that each one must maintain its boundaries in order to function properly? After the children have given their report cards to their parents (some reports were good, some were bad), she continues with the story. They ask permission to go out to play. She refers to Grace's behavior at home, saying that Grace spends too much time on the streets and will not obey her when asks Grace to come into the house. She is also probably talking about rewards and punishments.

We talked about the need to continue therapy after the holidays. Helen is aware of her need for support and counselling but makes it quite clear that coming to the clinic constitutes a new burden for her. They will be seeing the social worker in the future but it will be impossible for them to continue Art Therapy.

Summary

Grace was an abused child recently placed in a foster home by the clinic, after her former foster mother and birth mother rejected her because of aggressive behavior. Her new family had difficulties coping with her behavior and felt that she disturbed the family and added a new burden onto their shoulders. Her foster mother, Helen, expressed her feelings of incompetence and depression through her drawings.

For Grace, an elective mute, Art Therapy was a means of expressing her feelings of fear, hostility, etc., and recreating her traumas. Grace's drawings made me suspect sexual abuse during the pervious ten years. Furthermore, the drawings suggested both a desire to talk and, at the same time, a fear of talking. If she were to talk, what might come out? Grace may feel that she <u>deserved</u> whatever abuse she was subjected to. She may feel that she was responsible for the behavior of the adults who were abusing her. Sharing the paper and the art task with the therapist helped her to establish, although temporarily, a trusting relationship with an adult figure. Unfortunately I was not included in the clinic team so that suggestions about treatment and procedures were limited.

Don

Description of the family

Don is a 13 year old who was referred by his school because of aggressive behavior. The social worker who received the case in the clinic considered that the abnormal behavior he displayed could be related to physical abuse and neglect and so referred him for Art Therapy assessment.

Don is the only child from his mother's second marriage. He has two half-sisters. The mother, Donna, is 38 years old, and was abandoned by her second husband when Don was born. Don was sent to live with his father when he was two years old because Donna could not get the father to give her any financial aid. During the three years he lived with his father, there was a poor relationship with the mother. Donna re-entered the relationship when she was informed that Don's stepmother mistreated him physically and verbally. Donna decided to take Don to live with her again for the next two years. Don then went back to live with his father. For the two years prior to this interview Don has not seen his father.

Donna works from 6 a.m. to 6 p.m. as a waitress in a coffee shop.

Donna, her two daughters and Don, have lived for seven years in a small rented room in Donna's sister's house. They have had a very violent relationship with the extended family, to the point that they do not talk to each other. Donna cannot use the house kitchen (she uses a neighbor's kitchen) and Don has to stay inside the room when he is at home and cannot even watch the TV in his aunt's living-room.

Because Donna does not want Don to stay at home alone, Donna sends him to school at the same time that she leaves for work (5:30 a.m.) and he has breakfast and lunch at school. He studies from 7 a.m. to 1 p.m. One of the sisters, who attends a neighboring school, always joins Don in the morning. Donna takes a bus from work to Don's school in the evening to pick him up. Donna is quite controlling and overprotective of Don. She does not want him to help with "female chores" (like doing his own laundry) and she calls him homosexual if he does something like washing his own pants. This is counterproductive because if he were to help with the chores, this overburdened mother would have some relief. They have not moved to another place for financial reasons.

Don is physically punished not only by his mother but also by his teacher, with Donna's approval. His acacemic performance is acceptable.

Art Therapy

Appointments were arranged for four consecutive Wednesdays but only one session took place. Don was warm and seemed confident and charming. Rapport with the therapist was easily established and Don tried to get her affiliated with him in order to make an impression in front of his mother. It appears that he is used to making coalitions. His main concern seems to be his mother's control and her distrustful attitude toward him.

Donna looks hostile and comments that she was unwilling to come as she had trouble getting time off work.

I ask both of them to do a free drawing. Donna asks if it is really necessary for her to draw. "Don is the person with the problem", she says. Don says that he likes to draw and takes on the art task with enthusiasm. His drawing has a story-telling quality. He verbalizes freely while drawing, making allusions to his current situation, wishes and past memories (Figure 28).

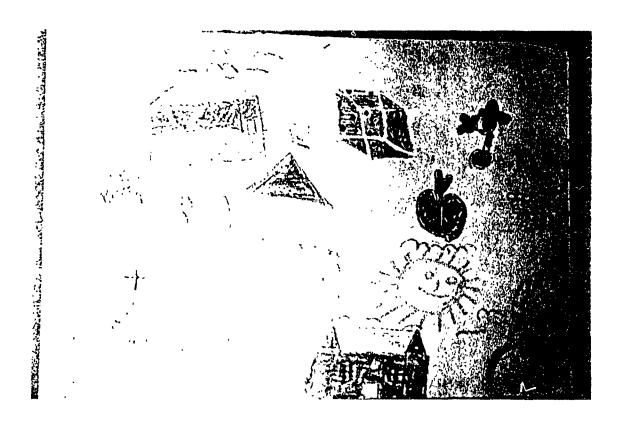


Figure 28

Don produces a series of images: two different houses, a church, a truck in which his father and himself travel (expressing his wish to reunite with the father and probably his identification with the male parental figure). His drawing contains several groups of images. There is the sun and birds over the house "that he would like to have", a tree and a flower, another sun and the moon, a ship on the water.

Donna uses the crayons without energy, producing a poor landscape that contains water (a river), a flower, a tree and some birds. She is projecting a poor self-image. The drawing makes me think that she feels depressed.

Summary

Don is a pre-adolescent referred to the clinic for assessment because of aggressive behavior at school. The social worker in the agency interviewed the child and concluded it was a case of maltreatment and referred him for Art Therapy evaluation. He is the only male in a family of four. His mother is overprotective of him and seems to develop a symbiotic relationship with him. His attempts at reaching autonomy are seen as defiance by the mother and teacher and provoke physical punishment from both maternal figures. Donna displays a resistance to therapy from the beginning and that may explain why they did not come back after the first session.

Donna's drawing symbolizes her depression, while Don's colourful and joyful drawing represents his desires: a new independent house, a relationship with his father and probably his ambivalent feelings towards his father's abandonment and his mother's overinvolvement.

Unfortunately it was impossible to get in touch with the school teacher who referred them, so we could not even follow up the case.

Chapter VIII

Therapeutic Considerations

Although the families were seen for assessment and not for therapy per se, I consider that as the therapist joins the family s/he disturbs the old system and introduces change. (Minuchin, 1974; Nichols, 1987).

If one understands maltreatment as a cycle that perpetuates itself over generations, one has to consider the abuser as a former victim. In order for interventions to be useful to the family, it is important for the therapist to provide a holding environment in which the abusers do not feel that they are on trial, and in which family members' defenses are respected. A judgmental environment would generate a defensive, negative attitude towards therapy. With a holding environment, family members will find respect, mirroring, echoing and nurturing.

Most of the abusers I have worked with so far were receptive to counselling and interested in improving their parenting skills. They observed that their children's hostility diminished when they stopped physical maltreatment. This observation applies to both families that were part of the thesis as well as families undergoing medical treatment in my private medical practice. In rare circumstances, maltreatment was an expression of rejection. These families did not possess enough resources (either parenting skills or psychological resources like self-esteem, knowledge, self-efficacy) to deal with their children's misbehavior.

During Art Therapy, one is symbolically feeding the family members with the materials, thereby becoming an auxiliary ego for them. Thus, assessment in Art Therapy does not occur in isolation. While performing the art tasks and discussing the products, the therapist may help clarify diffuse boundaries as well as open rigid ones. These processes appeared to occur with Francine and Elaine. For each of these women, a subsystem was strengthened by therapy, resulting in mutual support, less stress, less hostility, and less physical punishment. Minuchin (1974) considers the therapist as a boundary maker.

I became aware of a countertransferential issue while writing this thesis. I think that I unconsciously colluded with some of the families in retaining an unmodified family structure (at least I played their own game of roles). Perhaps I was acting out of inexperience, operating within a cultural context in which it is normal that a father assume a rather detached or peripheral role.

It seemed very difficult to overcome a family fear or resistance to bringing the father into the therapeutic situation. One of the rigid roles in our culture dictates that the father is the provider, above all the provider, sometimes nothing else but the provider. He will not participate in most of the daily family decisions if they are not related to money: for example, which school should the children attend, when and where to find a doctor, what kind and what strength of punishment to use. These are considered to be "women's affairs." In our culture this view of the role of the father is so ingrained that women seem afraid even to suggest the contrary.

Chapter IX

Interpretation of Findings

The Process of Art Making and the Art Products

l. Attitude Towards Art Tasks

I expected the adults to display more resistance to performing the art tasks. Their cultural norms provided them with very little experience with art, since art itself is something outside of their day-to-day lives. Furthermore, drawing, as an activity, is considered to be suitable only for children, not for adults. It is possible that the crayon medium was partly responsible for their view that art is a childish activity. However, it is my opinion that the primary source of this attitude was cultural. Adults complained about their skills but, except for two individuals, they always cooperated and most of them seemed to enjoy drawing.

2. Quality of Art Product

Adult drawings were often infantile, which may be accounted for by the fact that these adults had little previous exposure to art materials and tasks. It may also reflect poor self-confidence. Malchiodi (1990) says that "In art expression, anxiety generally displays itself in regressed, kinesthetically formed expression" (p. 28).

Gerber & Lyons (1980), in <u>A Developmental Approach to Assessment in Adult Art Psychotherapy</u> state, "The mentally ill adult reflects in his or her artwork a regression to similar concerns indicating the unresolved conflicts of a developmental phase in which they have been fixated " (p. 105). I am not sure that we could talk about mentally ill adults in these cases, unless we consider dysfunctionality to be related to neurotic states.

Children's drawings, except for those of Mary and Bernard, stayed within respective developmental stages (Lowenfeld & Brittain, 1964).

3. Initiative

Adults usually waited for the therapist to initiate. They recreated a submissive type of relatedness common in a hierarchical society. Children also waited for the therapist and adult members to initiate but only in the beginning. After the children established a trusting relationship with the therapist, they explored the office freely. They initiated activity once they tested the situation and determined that the restraints imposed by the adult members were not reinforced by the therapist.

4. Themes

Themes were usually simple and concrete. Very rarely did they involve make-believe or story-telling. Adults sometimes felt relieved if they did not have to choose the subject matter, as when the therapist asked for a self portrait or a family portrait. Their autonomy is compromised. At other times they were anxious if asked to perform a structured task. Anxiety may have arisen from the feeling of being tested: skills and secrets could be revealed.

Abusive situations were not recreated in an explicit way. This seems to reveal ego defenses of denial and avoidance.

5. Repetition of Images

Many of the clients showed a tendency to repeat images. Repetition took two forms: duplication within a drawing, and re-occurrence of images from one drawing to another. There are several examples of duplication within a drawing: pots by Francine (Figure 29); flowers and apples by Xiomara; circles and sticks by Mary and Bernard; houses and trees by Rose and Grace.

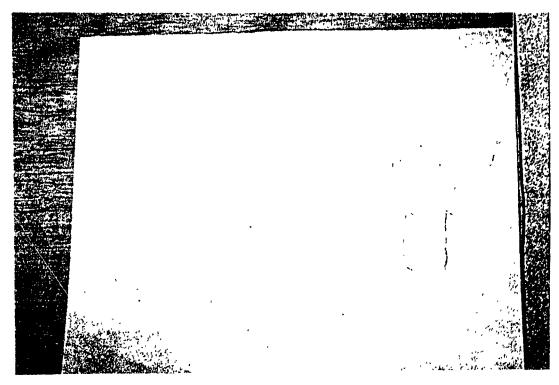


Figure 29

An example of re-occurrence of images from one drawing to another was provided by Albert. Robots appeared in several of his drawings, but he was the only child who did not duplicate figures within a drawing. Lowenfeld & Brittain (1964) relate repetition of images to rigid maladaptive patterns. Repetitions may also reveal unresolved conflicts that are symbolized by the same kind of images.

6. Self-Association with Product

There was rarely self-association with the product, which may reveal their poor capacity for insight. After each task family members were asked to make comments about each other's drawings, which they usually did with value judgments such as "it looks pretty", "why did you use blue instead of red?", "one arm is shorter than the other", reflecting negative patterns of transaction, which have been described as the main means of communication among members of families in which domestic violence occurs (Masterman, 1988). Usually adults avoided talking about their own drawings, focusing instead on the children's drawings. In general, adults appeared to behave according to a very concrete mode of thinking. It was very difficult for them to discuss their feelings.

Although Art Therapy was a novel therapy for all of the clients in this study, constraints to their expressive behavior during sessions are probably attributable to a more general origin. For most of these families, their involvement with Art Therapy was their first experience with <u>any</u> kind of therapy.

7. Family Drawings

None of the children included themselves in their family drawings, which can be interpreted as a poor sense of belonging, probably stemming from their transient way of life. "Children who are psychologically maltreated by their parents or siblings tend to feel unloved, unwanted, inferior, and not a part of their family system" (Malchiodi, 1990, p. 35).

When Kelly, a four year old who lived with an aunt and had been neglected and abused by her mother, looked at her finished family portrait and realized that she had not included herself in the drawing, she exclaimed that she would draw herself but on a different page. Curiously, she had included both her biological mother and her foster mother in her first drawing. Of course, there may be other interpretations for children not including themselves in their own drawings. In Kelly's case perhaps she was expressing her desire to separate and be autonomous, coinciding with her stage of development and her position in an enmeshed system.

There may have been a poor sense of identity in these children, because a sense of identity is related to a sense of belonging and the family is the matrix for both (Minuchin, 1974). Several of the drawings of a human figure without clear features or with no features at all may represent a diminished sense of self. One's sense of identity is compromised when the boundaries between family subsystems blur (when these subsystems are enmeshed). Some of the children tended to identify themselves with the caretaker, who represents a stronger figure.

8. Family Structure as Represented in Drawings

Verbalizations made after the drawings were produced suggested that the arrangement of the family members in a drawing reflected significant alliances and boundaries between subsystems. When family drawings were produced spontaneously (not as a task) the family was depicted as engaged in a common activity. Elaine, for example, depicted her family playing on the ground. On the other hand, when family drawings were requested as a task, family members were depicted in a static state, as illustrated by Patrice's family drawing (see Figure 21).

9. Some of the Drawings were Mainly Outlines, Rarely Filled in with Colour.

Examples are those of Mary, Lynda, Rose, and Grace. Albert's drawings conform to the observation of Manning (1987) that:

Both the abused children's drawings and those of the children from violent families used the method of outlining the contents of the drawing and typically filling in with another colour. This is interpreted as an attempt to firmly establish boundaries of the contents of the drawing. (p. 23).

And the boundaries of the drawing may very well represent their selfboundaries and the boundaries of subsystems in the family.

10. Use of Space

The use of space varied greatly from one client to another. Children had the tendency to utilize more space on the page and there were more integrated compositions in the adult drawings. In children's drawings, except for Mary and Bernard, I consider that the use of space corresponded with their developmental stage (Lowenfeld & Brittain, 1964).

The quality of family interrelationships was also reflected in the use of space. Symbolic emotional space in the drawings corresponded to family characteristics. If you feel small, you use little space. In enmeshed families, there's limited physical space around individuals, so that there is also limited emotional space.

11. Cultural Stereotypes

There was a difference in imagery produced by males and females, regardless of whether they were children or adults. Among females, flowers, apples, usually empty pots and houses were produced. Boats, cars, helicopters, animals and planes were more often found in the drawings of males. This may be related to cultural stereotypes.

12. Depiction of Ambivalence

In several cases children portrayed night and day (sun and moon) concurrently, probably expressing ambivalent feelings. Examples include Albert, who drew sun and clouds, moon and stars, in the same drawing (Figure 30). Rain is falling from the clouds and there is a sun over his father's car. In Rose's last drawing, she also drew a sun and a moon over a house and said "the sun sets, while the moon rises" which could refer to the recent separation of her mother and stepfather.

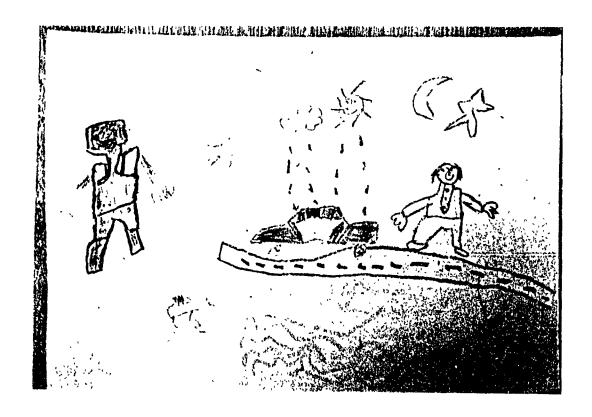


Figure 30

13. Children's Depiction of Aggressive Feelings

Albert's dog with big teeth is a dog who will bite anyone coming into the house. Also, in Willy's bombardier plane, one of its bombs hits his stepfather's car after his mother talked about having been battered by her husband. The plane is located in the center of the page (Figure 31) and the car is on the top. An orange line represents the bomb falling from the plane to the car. The children also depicted fear, as illustrated by the old man and the devil in Willy's drawings, and by the patota in Mary's drawing.

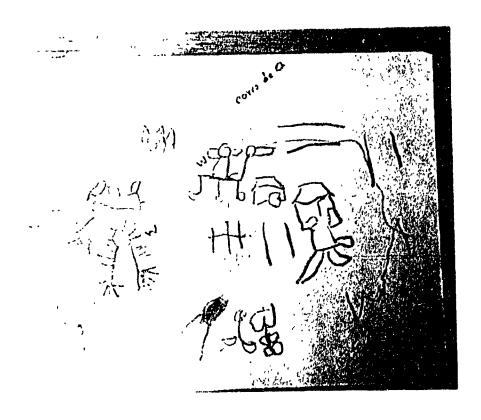


Figure 31

Family Interactions and Structure

1. Punishers

I found that punishers were females more often than males. Fathers were usually the abandoning figure. Female adults tended to avoid having males physically punish children because they feared that males were harsher.

2. Type of Family

Most of the families were incomplete, trigenerational families, and children were living with stepparents or foster parents. Rose lived with her mother in her grandmother's house after living with her mother and stepfather. She had no relationship with her biological father. Albert and Bernard's parents did not live together, their mother having formed a new family. The children lived with their grandmother and father. The father was disengaged. Mary lived with her grandmother, aunts and uncles, while her mother and father had formed new families from which she was excluded. She had not seen her mother for three years when I saw her for the first time and was visited by her father only once in a while. Grace lived with an uncle after having lived with her foster mother for eight years and with her birth mother for a short period of time. Don and his mother were abandoned by his biological father when he was born, and he lived, from time to time, with either his father or his mother.

3. Grandmother as Caretaker

The grandmother played a maternal role in the cases of Mary, Willy, Albert and Bernard. She shared the maternal role with the mother in Rose's case. In Kelly's case the biological mother had been a stepchild for her older sister, who was currently the stepmother for Kelly. In Grace's case, the agency assigned an uncle and aunt as stepparents.

4. Sense of Belonging

All of these children have experienced a transient way of life. As they usually excluded themselves from family drawings, it seemed that their sense of belonging and their sense of identity were compromised.

5. System Boundaries and Dysfunction

Enmeshment of subsystems was found (usually in mother/children or grandmother/children subsystems) while fathers were often peripheral. It is interesting to note that when boundaries blur, the family may become overloaded and will have difficulty adapting to stressful events (Minuchin, 1974), which can be related to the frequence of abuse in these dysfunctional families. Enmeshment of the subsystems was more evident in family interactions during the sessions while family drawings seemed to reflect a desire for separation rather than enmeshment.

6. Collusions (Triads)

In Willy's case, the grandmother colluded with her grandson to deny his mother's authority and even rights to her son. In Mary's case, the family seemed to collude to keep the mother peripheral. In Albert's case, there also seemed to be collusion to keep the father peripheral.

7. Disengaged Father

In all cases, the father was detached and/or peripheral from the rest of the family. Typically, the fathers were incompetent in their parental role, remote and ineffective (unstable at work, unable to provide a living for the family, minimal communication with children). This was reflected in their infrequent attendance at therapy. Fathers were significantly impaired in their ability to fulfill the paternal role. Wolfe (1987) maintains that "The parent who is socially incompetent fosters incompetency in the child, who in turn reacts adversely to the parent. A vicious cycle of rejection, depression, or low self-esteem may result, leading to child maladjustment and parent-child conflict" (p. 7).

Although peripheral, fathers continued to be the bosses. This left the mothers and grandmothers with authority but without power, overburdened with responsibilities, applying limits inconsistently. Often, the allocation of authority was dispersed among several people in the home.

8. Style of Parenting

Only in Rose's case was there severe child abuse. In the other families, physical punishment had started as a common culturally accepted child-rearing practice. Most of the families (Albert, Kelly, Mary, Rose, Willy, Don, Arthur) had adopted an abusive style of parenting, which can be explained on the basis of an abundance of overwhelming factors and the absence of compensatory factors (Wolfe's Transitional Model, 1987).

9. Authority Subsystem

Rules were inconsistent in all of the families. Adult behavior was unpredictable. Authority was often distributed among several adult members of the family.

10. Interactional Patterns

The relationship between adults and children is one of submissiveness. Verbal interaction between family members is poor. There is a widespread cultural belief that it is useless to talk to children because they are too little to understand what one is saying. This is related to physical punishment. "It is impossible to reason with kids", they say. There is also a cultural acceptance that there is a "natural badness" in children, which provides a justification for harsh punishment (to control badness). Verbal communication between parents and children is often unidirectional (an adult emits the message, the child receives). Among adults a conflict-avoiding transactional pattern is commonly observed.

11. Need for Nurturance

Younger children always appeared eager to comply, to be loved. Don (11), Rose (12), and Grace (10), and their mothers displayed a defiant and hostile manner, with communication mostly of a symmetric type, and their mutual interactions were usually negative. A need for nurturance was clear in the way some children attempted to have all the crayons in one hand, or asked if they could take them home, or asked for more paper or tried to prolong the session time. They appeared to be anxious about coming back and looked for closeness and/or physical contact with the therapist.

12. Common Symptoms in these Children

- withdrawal anxiety and fear
- aggression
- insecurity
- neediness
- elective mutism
- hostility
- difficult relationships with peers
- acting-out (sexual behavior, tantrums, etc.)

Children who presented fewer emotional and behavioral problems came from families where more compensatory factors (Wolfe, 1987) were present. Most of the children seemed to have lost faith in adults, partly because of their unpredictability, partly because of their aggression. Feelings of unworthiness and low self-esteem were common (Bernard, Xiomara, Francine, Donna). Mary expressed ambivalent feelings towards herself as was symbolized in her Ninja Turtle drawing (Figure 32) and the little mouse at the bottom of the same page.



Figure 32

13. Defense Mechanisms

There was identification with the aggressor (Willy), avoidance and denial in almost all of the cases.

14. Strengths in the Family

The social norms of the families in this study include physical punishment and abuse as acceptable child-rearing practices. Nonetheless, when therapy introduces restrictions to the use of coercive methods, and recommends different ways of resolving problems, family members respond in a positive way. This willingness of change, to abandon earlier patterns of behavior, is a concrete manifestation of a desire to solve a problem.

Most of the families were enmeshed, characterized by enhanced communication. This increased communication can be considered a strength which can be directed toward more effective means of resolving difficulties. Limitations to the family strengths derive from low self-esteem, low knowledge, and low self-efficacy.

Chapter X

Conclusions

Given that family violence is rooted in structural violence (Gil, 1978), a position with which I concur, alternative and generalized values should appear in the structure before family violence can be eradicated.

What do we do in the meantime? Should we just wait until major changes occur? We shall not. On the contrary, we can contribute in many ways to increase awareness of the importance of the issue of family violence. In particular, we can alert people to the serious implications for the victims, to the importance of breaking the violence cycle <u>now</u>.

How can Art Therapy contribute? It certainly is a valuable tool in assessing the problem, the sequels and in tapping the family secret so that the families, the therapists and the agencies dealing with this problem can help to stop family violence and protect the victims. It can also contribute as a therapeutic modality which uses primarily non-verbal means and facilitates communication. It can contribute to the restoration of family function, and give the family a new, significant life experience. It can also be used for crisis intervention. Most of the children in the sample had behavioral problems, poor self-esteem and a great need for nurturance. They enjoyed drawing. As mentioned elsewhere, the

children have few opportunities to use art materials. An Art Therapy session can constitute not only a nurturing experience but can also help the children to discover a different level of meaning. In other words, Art Therapy can enrich their lives, make it meaningful, not only through the art process but also through the therapeutic relationship, where it may be the first time that they experience a very different type of relationship with an adult, a relationship in which they feel respected and valued. This can be also true for the adult members of the family.

The findings with this small sample of families do not differ from those of other authors (Escallon, 1989; Gil, 1970; Minuchin, 1974; Wolfe, 1987). Family structure and dynamics, as well as conditions that contribute to make a family a violent one, do not seem to differ from one culture to another. For example, Wolfe (1987) notes that "maltreated children are twice as likely to live in a single-parent, female-headed household...and are affected by numerous stress factors..." (p. 21).

With reference to Wolfe's Transitional Model (1987), I found that compensatory factors such as community programs for parents, coping resources, the presence of a supportive spouse, and low community restraints were commonly absent, while destabilizing factors like weak preparation for parenting, stressful life events, sources of anger and aggression, etc., were often present. This could explain the development of an abusive style of parenting that includes neglect as one of its main characteristics.

Children's drawings also display the same kind of commonalities described by authors like Manning (1987) and Malchiodi (1990): namely, need for nurturance, fear, depression, aggression, developmental delay, and low self-esteem. Adult drawings reflected feelings of incompetency and their own deprivation.

In the therapeutic relationship, a submissive type of relatedness was recreated while the family interacted in a way that has already been described by other authors. Negative interactions are common, parental figures are authoritarian and communication tends to be complementary. Poor parental and child-rearing skills were also evident.

The use of simple and concrete themes in the drawings reveals the poverty of spirit in these deprived persons, their poverty of resources (external and psychical) and their poor education.

There were three interesting findings:

- 1. The children did not include themselves in their family drawings. Similarly, abusive parents did not include the abused child in their own portraits.
- 2. The simultaneous drawing of the moon and sun in five of the children probably reflects their feelings of ambivalence towards their caretakers, as well as symbolizing their desire to reunite with the parents.
- 3. Children's drawings were mostly outlines that they rarely filled in with colour. This can be related to the media used or could symbolize preoccupation with self-boundaries, a need for containment in children who have poor control over their impulses.

The most significant outcome of this study is a confirmation that Art Therapy can contribute to the understanding of family function. Art Therapy can provide families a space, a new resource, a new dimension, especially if the therapy session can take place in an appropriate setting where different sorts of media can be offered.

My work confirms that child physical abuse is a profound, hidden problem, more widespread than other forms of domestic violence (marital violence, for example). Escallon (1989), in her study of maltreatment in Cartagena, Colombia, found 144 cases diagnosed between 1984 and 1988 in two hospitals and the national agency I worked with for this thesis. Only 22% of the cases were diagnosed as maltreatment at arrival. From 1990 on, up to 820 cases (from more than 2000 people) have been seen in the clinic, but in only three cases was child maltreatment the reason for admission. Clearly, most cases of abuse are unreported.

This is so not only because families tend to mask the occurrence of the issue but also because there is very little awareness of the emotional and developmental impact of childhood physical punishment. Because children are limited in their ability to express themselves verbally, adults tend to consider that children have a special invulnerability to trauma.

Even among Colombian health professionals, I found that there is a tendency to ignore, justify and/or deny the prevalence of child abuse as such, unless there are undeniable or observable signs of battering. I also found that the lasting effects of maltreatment are not generally acknowledged or recognized, even, again, among health professionals.

According to what I have observed so far, abuse starts during early childhood as physical punishment, a culturally accepted child-rearing practice. It would appear that the parent-abusers also were subjected to physical punishment when they were children themselves. I agree with Wolfe (1987) that when compensatory factors such as a supportive spouse, socioeconomic stability, community programs, and social restraints are absent, the child-parent relationship will deteriorate and make abusive behavior very likely to occur. Most of the destabilizing factors described by Wolfe (See Table 1) were present in the families I studied, while most of the compensatory factors were absent.

I believe Art Therapy to be an excellent means for assessing children and adults who are not verbally expressive, have little capacity for insight, and tend to maintain the secret of the violent interactions of their families.

It would be interesting if this study were to form the basis of a proposal to the national agency for the welfare of families, one which would include conducting an active search for violent and neglectful families, followed by the assessment and treatment of these families, complemented by the training of teachers (especially HI teachers). Emphasis should be placed on stopping the abusive cycle. This cannot be achieved without further research, and without impressing upon those people and agencies with the responsibility of the welfare of families that there are profound consequences of abuse and neglect.

The main means of breaking the cycle that continues from generation to generation are education, prevention (social policies) and therapeutic treatment of the family (ICBF, 1989). Why should there be a focus on the family? Because violence disturbs <u>all</u> its members: the victims, the witnesses and the abusers. Dealing individually with the victim's trauma will help the victim, but the disturbed violent family will probably continue to practice and perpetuate violence.

I feel that this modest study in art therapy assessment will make a difference, precisely because maltreatment is under-reported, because it is not assigned enough importance, because not enough is being done to prevent maltreatment. I hope my work will increase the concern about the need to deepen research in this field, help to find a way to uncover the harm done to children and contribute to the development of a useful tool for intervention during a crisis.

Working on this thesis was a wonderful experience. I learned a great deal about families, therapy and the images family members produce. It made me aware of the work still to do. It encouraged me to examine the imagery characteristic of my own culture. In some instances I was not even sure about what imagery corresponds to cultural stereotypes.

Overall the project was a learning experience that made me fully aware of all my deficits that I will have to overcome in order to be a good therapist.

Limitations

A number of limitations were encountered in performing this task.

- 1. Child physical abuse is under-registered in institutions. The privacy of the family is over-ruled only when a victim presents severe physical injuries that require medical and/or forensic attention, or when institutional protective measures for the child are in effect. When we consider that a high percentage of homicides occur inside the home, the importance of this modality of violence becomes clearer.
- 2. There was a very limited bibliography available on the issue of child abuse in the province in which I live. In addition, there is a very small international bibliography on art therapy evaluation with this population. Computer systems in the local libraries are not yet available, so it was not easy to keep up to date with the new literature produced in the last 18 months.
- 3. The clinic office that was available for the study was a small one, with a small desk and limited space for drawing. The office was noisy and did not provide as much confidentiality as was desirable.
- 4. It was in all cases difficult to assemble all the family members for all sessions. In several cases it was impossible to see the families for more than two sessions. Families coming from the social sector I chose to study are not people used to discipline. Other factors operating included immaturity, dysfunctionality, unpredictability, and minimal capacity for commitment.

- 5. A major limitation was the difficulty in standardizing conditions, which accounts for the introduction of modifications to the design of the study.
- 6. A search for financial support for this thesis was unsuccessful. If funds were available, I would have preferred to provide different kinds of materials. [From less controlled to more controlled Landgarten (1987)].
- 7. It could be argued that crayons were an infantilizing choice of art medium, producing a corresponding transference response. However, it is my opinion that this process, if present, produced a minor contribution to the outcome of the study. As pointed out earlier, in the culture of the clients of this study, the very act of drawing is considered to be a childish activity, one not appropriate for adult occupation. I feel that the choice of medium <u>can</u> be separated from this cultural norm, and that constraints to participation in drawing were primarily, perhaps entirely, culturally determined.
- 8. This work straddles at least three cultures: that of the therapist, that of the clients, and that of the evaluators. Throughout, I have been acutely aware of this fact, and have tried to deal with the cultural aspects and perspectives.
- 9. Because English is not my mother tongue, nor the language in which the study was conducted, it is inevitable that some subtleties are lost in translation.
- 10. Finally, I did not have the benefit of a local, accessible Art Therapy supervisor.

Modifications

There were several significant reasons to modify the thesis design from semiexperimental to case study. A major reason was that the families available to me in the clinic were characterized by such severe dysfunction that it was always difficult to maintain structured interviews and tasks. A conjoint drawing, for example, was not a good idea when parent and child would not even establish eye contact with each other due the high hostility existing between them.

There were also too many variables to consider. Physical abuse did not present without associated factors. In several cases sexual abuse had also occurred or was suspected. Most of the families studied had gone through parental divorce and the children had a transient lifestyle.

I realized that I lacked necessary experience in the areas of family art therapy assessment and child abuse for productive experimental or semiexperimental research. I did not even know precisely what milieu I would be working in.

It was also not possible to work with a co-therapist, who could have helped with the wealth of data that every session produced. Unfortunately family therapists in the clinic were not available because they were already overburdened.

The main purpose of the assessment was to determine the extent to which the members of a violent family are affected by an abusive inter-relational style. I decided to compile a collection of drawings produced by various members of a family and search for signs of common imagery, similar use of space and/or colour and art processes.

Chapter XI

Summary

The thesis aimed to increase current knowledge of physical abuse and its impact on the family system. Ten families were studied, with the therapist exploring commonalities in art behavior, art products, family member's interactional patterns and their relationship to the therapist.

The ten families were seen in a clinic facility and assessed through art. Five of these families were referred because of children's abnormal behavior at school, which made their teachers suspect maltreatment at home. Maltreatment in the form of physical punishment and neglect was confirmed in the assessments. The other cases arrived at the clinic because of violence in the family and were referred through the regular channels of the clinic.

Conditions in the clinic and circumstances with the clients were far from ideal. Many limitations led the author to change the original design.

Families were seen in different unstructured hour-and-a-half sessions, with no firm time limit. Every family was assigned one session a week for a total of four sessions. None of the families kept to the arranged schedules. Fathers were maintained peripheral by the family and the therapist omitted further interventions to include the father in what could be interpreted as countertransference. Families could not be followed up by the author, contrary to the original plans.

Family members were asked to draw. Their free drawings, self-portraits and family portraits were analyzed, taking into account several categories in art making, the art process and interactional patterns.

Five of the cases are described on detail.

Physical maltreatment is related to cultural parental attitudes toward childrearing. Families seen in evaluation were all multi-problem and multi-stressed. Socioeconomic conditions of the families seemed directly related to children's neglect, scapegoating and abuse.

Family dysfunction consisting of family disruption and children's transient way of life are part of a complex in which maltreatment flourishes. Concurrent life characteristics in these families make it difficult to ensure that commonalities observed in the drawings of the different families could be related solely to maltreatment.

It was found that most of the adult drawings were infantile, while the children's drawings seemed to be appropriate to their developmental stage. Themes were usually simple and concrete in both adult and children's art tasks. None of the children included themselves in the family portraits. Several children drew a sun and moon in the same composition, in what could be considered symbolization of ambivalent feelings towards caretakers. Identification with the aggressor was also manifested. Art tasks, especially with children, seemed to serve as an expressive outlet for repressed feelings.

Art Therapy, as a non-verbal modality, proved to be a valuable tool in assessing violent families, facilitating communication between family members and therapist, and constituting a space in which the family could share a different kind of experience.

A larger sample of families would be needed in order to confirm an hypothesis that commonalities observed in the art process and products can be directly related to the traumas produced by maltreatment and neglect.

This observational study will serve as a basis for further research in the same field.

Chapter XII

In Reflection

It is sometimes true that a project in which you have invested considerable time, effort, and energy becomes a never-ending project. Perhaps this happens because all terminations are difficult to deal with, or simply because as one answers initial questions, new ones present themselves.

Certain insights and observations have been an integral part of my growth as a therapist. They developed through the course of my thesis design and redesign, through interaction with the families who provided the subject matter, and through discussion with various professionals in both Canada and Colombia.

I feel it important to share these insights and observations with others interested in Art Therapy. By sharing with readers of this thesis, I hope to stimulate thought, generate ideas, and alert to phenomena that I feel play important roles in therapeutic outcome. My goal is to articulate and consolidate perspectives that may ease the passage of other travellers, in other countries, in other cultures, through the domain of Art Therapy.

Because these comments lie outside the prescribed boundaries of the main body of the text of this thesis, they are presented in this chapter titled "In Reflection".

Perhaps my most significant realization is that cultural factors are intimate and irrevocable components of Art Therapy. I feel that my thesis research has yielded vivid examples that universal psychodynamic processes are expressed within the sociocultural context of the client, shaped by her/his iconic, attitudinal and stereotypical standards and criteria. These standards and criteria may differ radically from others in other cultures, from others within the same culture, and, most critically, from those of the clerapist. As a result, I feel that a therapist must make a conscious, deliberate effort to understand clients' cultural norms, values and icons. I am convinced that a therapist's value as an interpreter of art products is dependent on her/his sensitivity and capacity to comprehend the subjective world of the client.

For example, we must exercise caution in interpreting the significance of colours used by clients in their art. In Colombia, red is generally associated with evil, while blue is generally associated with good. It is potentially micleading to assume that the affective/emotional/qualitative associates of colours are uniform across cultures and societies. An effort must be made to determine the colour values for each society or culture or even subculture studied. These considerations are particularly relevant to Art Therapy, in which art characteristics (in this case, colour value) must always be interpreted in terms of the context.

Animals may also be symbols for different, sometimes diametrically opposed, concepts. For example, in Colombia, birds are viewed as symbols for either freedom or imprisonment, depending on the background of the individual.

Ideal norms established in a North American training program may be quite inappropriate in other parts of the world. Some of the conditions for conducting therapy (the intimacy of the office, the variety of materials offered, etc.) may be impossible to duplicate, as was the case in my research.

We must be aware that some sources of information about the psychodynamic processes underlying a child's behavior may be closed to the therapist. For example, in North America, children have access to a wide range and quantity of intact, whole, functioning toys. One should not assume that the same abundance and availability of toys is characteristic of countries in other continents. In Colombia, for example, many children grow up playing with toys that are incomplete, broken, fragmentary, etc. An object of play may be a single wheel that was originally part of a vehicle with a chassis, body, four wheels, etc. Thus while studying the manner in which a North American child plays with toys may yield valuable insights into the psychodynamics of the child, it may be extremely difficult to derive similar insights from a Colombian child's toyplaying activities. The fragmentary nature of the Colombian child's "toy" poses a profound constraint to inferring psychodynamic processes because of the limited interaction modes provided by the toy-fragment.

Cultural aspects are not only releval, twhen talking about the art behavior or the art products but they also relate to the research topic. Consider the topic of this thesis, child abuse. Societal views about the physical disciplining of children have changed in North America. There are now constraints to the use of physical punishment in schools, and a growing rejection of its use in the home. Such sensitivity is beginning to appear and exert an impact in Colombian society. Yet physical disciplining of children is still widely accepted as a proper means of controlling children, building character, etc. This attitude pervades all Colombian socioeconomic strata, held by both laypeople and professionals.

The difficulties I encountered in developing the thesis are surprising because violent issues are not considered to be strange phenomena in Colombia. Rather, they are part of daily life. They are so common that society must do as much as possible to change attitudes, to stop tolerating violence.

Consider the following example.

One night, in my early stages of my case work, I was awakened suddenly at three o'clock in the morning. Someone was screaming outside my window. I listened. I recognized the voices. They belonged to neighbours who were having marital problems. They had had a party the night before. They drank. They had fun and suddenly there was a family battle. This particular night the woman was crying for help and asking the man not to continue beating their adolescent son, who had recently come from another city where he was studying. The lady called the police and I suddenly remembered their little 5 year old girl. When I looked through the window I saw the girl walking alone through the garden. Nobody seemed to be aware of her needs at that moment. I went downstairs,

opened the door and ran to her. She was crying. I hugged her. I took her to her house and found her mother in an angry state. The girl had seen the police taking her father away and now she would have to listen to her mother's enraged outpourings against him. I asked the mother if I could take the girl to my place for a while. She agreed. In my home I offered the girl paper and crayons and invited her to draw. She recreated the drama she had just witnessed. Her defense mechanism was to identify with the aggressor. Drawing relieved her.

Perhaps precisely because it is pervasive, physical punishment per se may not be a primary source of psychological harm for Colombian children. Rather, harm may derive from disturbed parental empathic capacity, depriving children of maturation-promoting responses and setting up the chain of events leading to psychological disturbances.

What seemed to affect children was not so much the physical punishment itself but the fact that their needs were not met by their caretakers. In my opinion one of the worst aspects of maltreatment is that the child grows up feeling that s/he deserved whatever s/he got from the caretakers.

The therapeutic situation should not be a reproduction of their impoverished life. For the families studied in this thesis, the therapeutic frame was limited to the therapeutic relationship, and the offering of materials. Time and space constraints prevented the offering of further resources.

I am now also acutely aware of how countertransference can intrude on the therapeutic process, how the deepest layers of the therapist's unconscious participates in the therapeutic process. One must use the insights gained by the empathic immersion into one's inner life, especially those achieved during one's own therapy.

It is almost impossible to be absolutely certain about the accuracy of one's interpretations or of the extent to which there is interference by one's projection of unsolved business. It is of capital importance that one always be aware of such potential intrusion. Also, it is important that the drawings be considered within the context in which they are produced, taking into account the client's comments and associations with the products.

Supervision, while still in training or during the initial stages of a therapist's experiences with clients, can help to increase a therapist's awareness of any countertransferential issues that may arise. One of Francine's drawings (Figure 15) provides an excellent example.

My Canadian supervisor called my attention to the coffin-like figure to the left of the house. When I reviewed the drawing I had no doubt that the figure was alluding to death, which made perfect sense in the context in which the drawing was produced. My initial failure to observe this in the drawing derives from my still unresolved tendency to deny death.

It is difficult not to be moved by the pathetic cases that one has to deal with as a therapist. But for the sake of the clients themselves, it is important to maintain neutrality and stay within the limits implied in a therapeutic relationship, while at the same time providing a holding environment and playing the advocate role for these family members. The knowledge that all members of these families were victims of some sort helped to maintain the neutrality. However, in Mary's as well as in Rose's cases, I was aware of my tendency to have rescue fantasies, manifested sometimes by taking sides with the neglected or abused child, and in a certain tendency to get overinvolved.

Now that I have completed this study, I have learned much about the real conditions and limitations for research of this type to develop in my country. I should, perhaps, have started with a collection of imagery produced by different populations. That would had given me an in-depth knowledge of which images correspond to which populations, which ones are stereotypical, etc. This knowledge would also constitute a baseline, a body of information which could nourish further investigations.

I believe this study has achieved several objectives. First, the work illustrates the value of Art Therapy in dealing with family dysfunction. Second, the work casts light on the structure and dynamics of violent families. Third, but by no means least, the work reveals and highlights the importance of cultural issues in the practice of Art Therapy.

References

- Bing, E. (1970). The conjoint family drawing. Family Process, 9, 163-179.
- Burguess, R. L. (1978). Family interactions in abusive, neglectful, and normal families. Child Development, 49, 1163-1173.
- Burguess, R. L. (1979). Child abuse: A social interactional analysis.

 In B. B. Lahey & A. E. Kazdin (Eds.).

 Advances in Clinical Child Psychology, 2, 42-172.
- Colombia: Violencia y Democracia: Informe presentado al Ministerio de Gobierno por comisión de estudios sobre la violencia. (1987).

 Bogotá: U. Nal de Colombia Centro Editorial.
- Escallon, C. (1989). Sindrome Niño Maltratado: Tipologías. Unpublished.
- Federal standards for child abuse and neglect prevention and treatment programs and projects. (1978). Washington D.C.:

 U.S. Department of Health, Education and Welfare.
- Gerber, N. & Lyons, S. J. (1980). A developmental approach to assessment in adult art psychotherapy. <u>Arts in Psychotherapy</u>, 7, 105-112.
- Gil, D. G. (1970). <u>Violence against children: Physical child abuse</u>
 <u>in the United States</u>. Cambridge, Mass: Harvard University Press.
- Gil, D. G. (1978). Societal violence and violence in families.

 In Eekelar, J. M. & Katz, S. N. (Eds.) <u>Family violence:</u>

 <u>An international and interdisciplinary study</u>. Toronto: Butterworths.

- Gillespie, J. (1989). Object relations as observed in projective mother-and-child drawings. <u>Arts in Psychotherapy</u>, 16, 163-170.
- Goodenough, W. H. (1963). Cooperation in change. New York: Sage Foundation.
- Gutierrez de Pineda (1989). <u>Cambios y tendencias en la familia Colombiana</u>.

 Presented to I Congreso Colombiano de Salud Familiar,

 Bogota, Oct, 1987. OPS, MSN, Cafam Eds. Sept, 1988.
- ICBF (Doc.) (1989). Aplicacion del enfoque sistémico en la prevención de la violencia familiar. Cartagena: (photocopy).
- Johnson, D. R. (1987). The role of the creative Arts Therapies in the diagnosis and treatment of psychological trauma.

 Arts in Psychotherapy, 14, 7-13.
- Klein, M. (1959). Our adult world and its roots in infancy.

 In: The writings of Melanie Klein. London: Hogarth Press, 1975.
- Kohut, H. (1971). <u>The analysis of the self.</u>

 New York: International University Press.
- Kohut, H. (1977). <u>The restoration of the self.</u>

 New York: International University Press.
- Koppitz, E. M. (1974). <u>El Dibujo de la Figura Humana en los Niños.</u> (2nd Ed.). Trad. M. J. Garcia & M. R. Braile. Buenos Aires: Editorial Guadalupe.
- Kramer, E. (1971). Art as therapy with children. New York: Schocken Press.
- Kwiatkowska H. Y. (1978). <u>Family therapy and evaluation through art.</u>
 Springfield, Ill: Charles C. Thomas.
- Landgarten, H. (1987). Family art psychotherapy. New York: Brunner/Mazel.

- Leon, C. (1984). Psychiatry in Latin America.

 In J. Mezzich & C. E. Bergaza (Eds.).

 Culture and psychopathology. New York: Columbia University Press.
- Levant, R. (1984). <u>Family Therapy: A comprehensive overview</u>.

 New York: Prentice Hall.
- Levick, M. (1975). Transference and countertransference as manifested in graphic productions. <u>Journal of Art Therapy</u>, <u>2</u>, 203-215.
- Lowenfeld, V. & Brittain, L. (1964). <u>Creative and mental growth.</u>

 New York: Macmillan.
- Malchiodi, C. (1990). <u>Breaking the silence: Art Therapy with children</u> from violent homes. New York: Brunner/Mazel.
- Manning, T. M. (1987). Aggression depicted in abused children's drawings.

 Arts in Psychotherapy, 14, 15-24.
- Masterman, S. (1988). Los contextos de la pareja violenta. Sistemas Familiares, abril, 50-62.
- May, Rollo (1985). My quest for beauty. Dallas: Saybrook.
- Miller, A. (1981). The drama of the gifted child. New York: Basic Books.
- Miller, A. (1986). Thou shalt not be aware: Society betrayal of the child.

 New York: Meridian.
- Minuchin, S. (1974). <u>Families and Family Therapy</u>.

 Cambridge, Mass: Harvard University Press.
- Naumburg, M. (1966). The nature and purpose of dynamically oriented art therapy. <u>Psychiatric Opinion Journal</u>, <u>2</u>, 39-47.

- Nichols, M. P. (1987). The self in the system: Expanding the limits of family therapy. New York: Brunner/Mazel.
- Rubin, J. A. (1984a). <u>Child Art Therapy: Understanding and helping</u>
 children grow through art. (2nd Ed.) New York: Van Nostrand Reinhold.
- Rubin, J. A. (1984b). The art of art therapy. New York: Brunner/Mazel.
- Sobol, B. (1982). Art Therapy and strategic family therapy.

 American Journal of Art Therapy, 21, 43-52.
- Solnit, A. (1978). Child abuse: The problem. In Eekelar, J. M. & Katz, S. N. (Eds.). <u>Family violence: An international and interdisciplinary study</u>. Toronto: Butterworths.
- Stemberg, C. J. (1977). Printmaking with abused children: A first step in Art Therapy. <u>American Journal of Art Therapy</u>, <u>16</u>, 104-109.
- Storr, A. (1978). Introduction. In Eekelar, J. M. & Katz, S. N. (Eds.).

 Family violence: An international and interdisciplinary study.

 Toronto: Butterworths.
- Ulman, E. & Dachinger, P. (Eds). (1975). <u>Art Therapy: Theory and practice</u>.

 New York: Schocken.
- Villar Gaviria, A. (1986). El niño: otro oprimido. Bogotá: Carlos Valencia.
- Watzlawick, P., Jackson, D. & Beavin, J. (1967). <u>Pragmatics of human</u> <u>communications</u>. New York: W. W. Norton.
- Wolfe, D. (1987). <u>Child abuse: Implications for child development</u> and psychopathology. San Francisco: Sage.

Bibliography

- Ackerman, N. (1967). Prejudice and scapegoating in the family.

 In G. H. Zuk & I. Boszormeny-Nagy. (Eds.). Family therapy and disturbed families. San Francisco: Science and Behavior Books.
- Andolfi, M. & Zwerling, I. (1980). <u>Dimensions of family therapy</u>.

 New York: Guilford.
- Bloch, D. & Simon, R. (Eds.). (1982). The strength of family therapy:

 Selected papers of Nathan Ackerman. New York: Brunner/Mazel.
- Bowen, M. (1978). Family therapy in clinical practice. New York: Jason Aronson.
- Bowen, M. (1980). Family systems theory . In S. Harrison & J. MacDermott

 (Eds.) New directions in childhood psychopathology.

 New York: International University Press.
- Davidson, D. (1966). Transference as a form of active imagination.

 <u>Journal of Analytical Psychology</u>, <u>11</u>, 135-145.
- Doane, J. (1978). Family interaction and communication deviance in disturbed and normal families: A review of research. <u>Family Process</u>, <u>17</u>, 357-376.
- Erikson, E. (1950). <u>Childhood and society</u>. New York: W. W. Norton.
- Fairbairn, W. R. D. (1954). The repression and the return of the bad object.

 In An object relations theory of the personality. New York: Basic Books.

- Freud, S. (1920). Beyond the pleasure principle. In J. Strachey (Ed.)

 <u>Complete psychological works</u>. London: Hogarth Press.
- Gantt, L. (1986). Systematic investigation of art works: Some research models drawn from neighboring fields. <u>American Journal of Art Therapy</u>, 24, 3-15.
- Gollub, D. (1985). Symbolic expression in post-traumatic stress disorder:

 Vietnam combat veterans in art therapy. <u>Arts in Psychotherapy</u>, <u>12</u>, 285-296.
- Greenberg, M. & Van der Kolk, B. (1987). Retrieval and integration of traumatic memories with the "painting cure". In: B. Van del Kolk (Ed.). <u>Psychological trauma</u>. Washington: American Psychiatric Press.
- Haley, J. (1964). Research on family patterns: An instrument measurement.

 Family Process, 3, 41-65.
- Hamilton, M. (1961). <u>Methodology of clinical research</u>.

 London: E. & S. Livingstone Ltd.
- Harris, M. & Landgarten, H. (1973). Art Therapy as an innovative approach to conjoint treatment: A case study. Arts in Psychotherapy, 1, 221-228.
- Jacob, T. (Ed.). (1987). <u>Family interaction and psychopathology</u>.

 New York: Plenum Press.
- Kramer, E. (1959). Art therapy in the Wiltwych School. School Arts, 58, 5-8.

- Kaplan, L. (1978). <u>Oneness and separateness: From infant to individual</u>.

 New York: Simon and Schuster.
- Kempe, C. H. (1973). A practical approach to the protection of the abused child and the rehabilitation of the abusing parent. <u>Pediatrics</u>, <u>59</u>, 804-812.
- Kempe, C. H. & Helfer, R. E. (Eds.). (1968). <u>The battered child</u>. Chicago: University of Chicago Press.
- Kempe, C. H. & Helfer, R. E. (1972). <u>Helping the battered child and his family</u>.

 Philadelphia: Lippincott.
- Kohut, H. (1984). <u>How does psychoanalysis cure?</u>
 Chicago: University of Chicago Press.
- Kris, E. (1952). <u>Psychoanalytic explorations in art</u>. New York: Schocken Books.
- Levick, M. & Herring, J. (1973). Family dynamics as seen through art therapy.

 <u>Art in Psychotherapy</u>, <u>1</u>, 45-54.
- Machover, K. (1949). <u>Personality projection in the drawing of the human figure</u>. Springfield, Ill: Charles C. Thomas.
- Madanes, C. (1984). Strategic family therapy. San Francisco: Jossey-Bass.
- Mahler, M. (1969). On human symbiosis and the vicissitudes of individuation.

 London: Hogarth Press.
- Mahler, M. (1980). Symbiosis and individuation: The psychological birth of the human infant. In S. Harrison & J. MacDermott (Eds.)

 New directions in childhood psychopathology.

New York: International University Press.

- Manrique, J. & Rodriguez, R. (1989). <u>Problemàtica socio-cultural</u>
 <u>de las familias marginales que propician maltrato al menor</u>.
 Cartagena: Thesis.
- Memorias. (1990). <u>II Congreso Colombiano de Salud Familiar</u>.

 Medellin, Nov 9, 10, 11 (1989), Medellin: Corfamiliar.
- Minuchin, S. (1985). <u>Calidoscopio familiar</u>: <u>Imágenes de violencia y curación</u>.

 Buenos Aires: Paidos.
- Patiño, C. A., Caicedo de Cardozo, E. & Rangel Bohorquez, M. (1988).

 Pobreza y Desarrollo en Colombia: su impacto sobre la infancia

 y la mujer. Bogotá: DNP-UNICEF, ICBF.
- Rosenthal, K. (1988). The inanimate self in adult victims of child abuse and neglect. <u>Social Casework</u>, October, 27-34.
- Sandler, J., Dare, C. & Holder, A. (1970). Basic psychoanalytic concepts:

 III. Transference. <u>British Journal of Psychiatry</u>, <u>116</u>, 667-672.
- Zuk, G. H. & Boszormeny-Nagy, I. (Eds.). (1967). <u>Family therapy</u> and <u>disturbed families</u>. San Francisco: Science and Behavior Books.