ARTICLES

A picture is worth a thousand words: An overview of drawing as a tool for projective assessment

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ABSTRACT

The aim of this article is to present an overview of projective psychological assessment. A brief historical introduction is presented, discussing some of the theoretical underpinnings of projective testing, which include Psychoanalytic and Humanistic theories. Projective testing is examined in terms of definition, the specific uses of such tests, and when the use of such tests would be appropriate in the clinical setting. Furthermore, some criticisms in terms of projective testing are advanced. The different types of tests are discussed, and some projective drawing techniques are considered in more detail.

Keywords: Draw-a-person (DAP); Draw-a-person in the rain (DAPR); Kinetic-family-drawing (KFD); personality theory; projective assessment; projective drawings; projective hypothesis

There’s no art,

To find the mind’s construction in the face (Shakespeare as cited in Muir, 1952, p. 23)

William Shakespeare knew that understanding the human mind was no simple business, as he reiterates here in Macbeth (Muir, 1952). Although he was not a psychologist, he was nonetheless fascinated by human behaviour and an expert in symbols and the subtle meaning behind words and gestures. Just as Shakespeare was a master of words and their meanings, so too must we develop our expertise in understanding subtle meanings. Sometimes these meanings are not to be found in
words or in numbers, but in the expression of a drawing. Thus, I will begin this article asking the question: Is there an art, to find the mind’s construction in a drawing?

In this article, I will look very briefly at the background of using drawings in psychology; the reasoning behind the use of projective methods; define and contrast different meanings of projective testing; examine the value of projective drawings; look at the scope of the use of projective drawings, and look at the strengths as well as the criticisms of projective drawings. Furthermore, I will look at different classifications of projective testing, and briefly examine three projective drawing tests: Draw-a-person (DAP), Draw-a-person in the rain (DAPR), and the Kinetic Family Drawing (KFD).

THE HISTORY OF PROJECTIVE DRAWING METHODS AT A GLANCE

Historically, there have been many formal and informal attempts to draw some form of meaning from human artistry. At the turn of the 19th century, attempts were made to include the artwork of mental patients as criteria for the diagnosis of emotional disturbance (Oster & Crone, 2004). Cesare Lombroso, now more famous for his conceptualisation of the atavistic criminal, was among those early theorists who attempted to demonstrate that the art of the mentally ill could offer some insight into their inner landscape (Vold, Bernard, & Snipes, 2002).

Of course, no discussion about projective drawings would be complete without mention of Sigmund Freud. He viewed art, not only of the patient but also of the professional, as a reflection of their personal struggles and worlds (Oster & Crone, 2004). Art (and dreaming) is viewed by Freud as external clues to unconscious processes taking place (Freud, 1953). Intrapsychic distress is seen as manifesting outwardly through mechanisms such as art, and dreaming.

Another force behind the interpretation of symbols was Carl Jung. Symbols representing personal experience could be analysed to gain greater understanding, and of course what greater source for symbols than drawings? Jung encouraged his clients to draw (Oster & Crone, 2004).

Both the psychoanalytic heavy-hitters stood firmly behind interpretation of material which may grant greater access to the unconscious processes of the client. This alone gave great impetus to the further development of drawings as projective measures (Oster & Crone, 2004).

Psychoanalysis continued to propel projective drawing forward, with Margaret Naumberg being credited as the developer of art therapy in the United States in the 1960s. Other important names include Janie Rhyne, who developed art therapy as part of a humanistic movement, and emphasised that art could also be used simply to allow self-expression (Oster & Crone, 2004).

According to Rabin (1981), the term ‘projective methods’ was coined by Lawrence
Frank in 1938 in an informal memorandum, although the term first appears publicly in Frank’s 1939 publication, *Projective methods for the study of personality* (Rabin, 1981). In the section where I refer to particular projective drawing assessments, I will make further mention as to the history of specific assessments.

**PERSONALITY THEORY GROUNDINGS**

Projective drawing assessments did not merely crop up in isolation. As I alluded above, there were certain theoretical underpinnings upon which the projective methodology rested. The assumptions behind projective testing must be based upon the assumptions of certain theories of personality. The most dominant of these theories: the psychoanalytical theory of personality. In order to understand the value and the purpose behind these assessments better, a review of the psychoanalytical conception of personality is in order.

The father of psychoanalysis, Sigmund Freud, thought that a person is constantly caught in a conflict between the drives within her, and the demands of the society in which she resides (Meyer, Moore, & Viljoen, 2002). These drives are contained and mediated by the three different parts of the personality: the primitive id, the authoritarian superego, and the mediatory ego. A person possesses both sexual and aggressive drives, which are continually garnering for satisfaction. At the same time, there are certain social mores and prescriptions which control these drives. Consequently, the individual experiences psychosocial conflict (Meyer et al., 2002).

A basic tenet of projective testing is that drawings reveal what is happening on an unconscious level in a person (Oster & Crone, 2004; Rabin, 1981). That which is in the unconscious cannot be recalled into the conscious mind by mere will of the individual (Meyer et al., 2002). These dynamics of the personality are then the basis of psychoanalytical assessment of the personality. Dana (1982) provides an eloquent description of the process of projective assessment from a psychoanalytic perspective: “Such personality description was dependent upon the psychoanalyst’s facility with symbolism, a matching of surface cues with analytic concepts descriptive of dynamics, or the inner machinery of personality” (p. 6).

Projective data are used in this way to infer something about a person. Surface cues, in the form of drawings, provide the skilled analyst or assessor with clues about what lies beneath the surface of the individual; things that are hidden and obscured; things that the person cannot or will not address consciously (Dana, 1982).

Psychoanalytic theory is undoubtedly the most heavily drawn upon when motivations are forwarded for the use of projective assessment of drawings, and it hardly seems possible to assess drawings without a thorough knowledge of the underpinnings of psychoanalysis. However, this does not mean that other conceptualisations of personality are not applicable to projective drawings.

Existentialist and Humanist psychologies emerged as a negative reaction to the determinist and reductionist psychoanalytical view of human beings. The theorists
behind these new ideas criticised psychoanalysis on the basis that it dehumanised the human experience, placed the locus of control firmly out of the hands of the individual, reduced humans to individual fragments of behaviour, and explained human behaviour in terms of a few very simple underlying elements (Dana, 1982; Meyer et al., 2002). In these new ideas, the human being is viewed as possessing dignity, free to make decisions with regard to her life, and consciously making these decisions. Furthermore, there is emphasis on the human as a whole, as elucidated by such theorists as Abraham Maslow, Carl Rogers and Victor Frankl (Meyer et al., 2002).

An analysis of the person from this point of view seeks to understand a person in terms of her phenomenological reality (Dana, 1982). An assessor can never fully understand another person, as the assessor has only limited contact with the reality of the other individual. This means that projective drawing assessment can only help to explain the reality of the individual, but it can never fully explain the experiential and mental world of another person. Personality is formed by the experience of the person in the world at that moment.

The role of the assessor who works from an existential/humanist perspective is much different from the psychoanalyst (Dana, 1982). Projective drawings provide information which can enrich the individual’s description of her own experience. It is understood that much of this description is simply not available to the assessor, regardless of which techniques are used. Thus, projective techniques are used to gain limited access to another individual’s subjective world; this access is gained only upon the grant of consent by the assessee (Dana, 1982).

Clearly, there is much contrast between the psychoanalytical view of personality, and the existentialist/humanist view thereof. This tension is translated into the different conceptualisations of value and use of projective tests, and specifically the use of projective drawings. A glance at the literature suggests that this tension might be more theoretical than practical. In most of the texts that I studied, the approach was not so much either/or, but both/and, striking a happy medium between the interpretive helpfulness of psychoanalysis, and the respectful subjective stance of humanism (Dana, 1982; Frank, 1965; Pickford, 1963).

TOWARDS A DEFINITION OF PROJECTIVE ASSESSMENT

Lawrence K. Frank (1965) draws our attention to a very salient aspect of personality theory:

When we examine the personality process or private worlds of individuals, we face a somewhat peculiar problem, because we are seeking not the cultural or social norms of the uniformities of organic activity, but rather the revelation of just that particular, individual way of organising experience and of feeling which personality implies. (p. 4)
In other words, in projective assessment we seek to understand in a very subjective way, to see the world as that person alone sees and experiences it. Yet, is this the way Freud would have described his examination of the personality? What would he have stated differently? These questions must be kept in mind when trying to define any concept. Different points of view result in very different ways of defining and seeing. Therefore, as we look at these definitions of projective assessment, it is important to keep in mind where these definitions come from.

Frank (1965) draws our attention to the fact that projective methods use a wide variety of techniques to arrive at generally the same purpose, that is to get information from an individual which he cannot or will not divulge verbally. A projective test involves a stimulus situation (i.e. Drawing), chosen because it will elicit hidden meanings from the client, not because the tester has preconceived ideas of what it should mean. The information from this stimulus will elicit information on the rich, private, idiosyncratic inner world and organisation of the individual.

Crumbaugh (1990) defines a projective technique as a personality assessment procedure in which the subject is asked to respond in some fashion to some form of ambiguous sensory stimulus or instructive idea. The basis behind this, according to Crumbaugh, is that the testee will automatically and unconsciously project elements of her personality into the activity.

The word we must focus on here is projection. Rabin (1981) draws our attention to the fact that projection can have more than one meaning. Projection, in the psychoanalytical sense of the word, refers to the tendency of a patient to externalise unacceptable drives which are contained in the unconscious. This form of projection is seen as a defence mechanism, which allows the individual to avoid psychic anxiety (Rabin, 1981). This is the meaning of projection in the psychoanalytical and psychopathological discourse. However, although this meaning is not entirely removed from projective testing, it is too narrow a definition to accept for the application of projective techniques.

Rabin (1981) points out that perhaps “externalisation” might be a more appropriate term to explain what happens in projective techniques, and concludes that three elements compose a thorough definition. First, that the nature of the stimulus used is ambiguous, or allows a subject freedom to respond as she chooses. Second, the response from the subject must be made with little knowledge of how the data will be used, and the response data must be of rich quantity and variety. Third, the assessor has the task of holistic-ideographic analysis (Rabin, 1981).

Rabin’s threefold definition of projective techniques provides for a good working definition lens through which to view the remainder of the essay. All that I would add to this is the insistence by Oster and Crone (2004) that interpretation is not only the task of the assessor, but that meanings should be tested and clarified with the subject, allowing them to assist in a fuller description of their inner self.
WHY WOULD WE USE PROJECTIVE DRAWINGS?

Oster and Crone (2004) provide a variety of reasons for the use of projective drawings, which are not limited to assessment. First, drawings are often viewed as less threatening than direct verbal interaction. Drawings allow a person to externalise emotions and events onto paper, which they may not have been able to do using words, due to the anxiety provoking nature of the content. “Telling without really telling” is how they describe the action (Oster & Crone, 2004, p.2). Drawing is a way of visually representing feelings and thoughts more indirectly. Frank (1965) concurs, indicating that drawing often evokes responses which are in fact more revealing than verbal responses, which have been filtered, either consciously or unconsciously.

A second reason for the use of drawings is to help focus a therapeutic session. Drawings can often bring to the surface relevant issues, and reveal additional information. This information may assist in focusing a particular therapeutic session, as well as overall assessment and treatment of the individual (Oster & Crone, 2004).

Drawing allows clients to decrease some inner tension by externalising content, as well as lessen their feelings of isolation by getting it “out there”. The drawings are often also sign-posts which allow a client to view a problem from a different perspective, and perhaps achieve creative new ideas with which to address issues (Oster & Crone, 2004).

Another factor to consider in the value of projective techniques in general is that these tests provide standard and ambiguous stimuli, and these stimuli provide a good basis against which to compare ways of thinking, speaking, and perceiving (Korner, 1965). This standard nature of the stimuli also means that it provides a good basis for research, giving a sound basis upon which statistics and norms may be constructed. This is important for effective comparison between different individuals.

Hammer (1981) emphasises a practical aspect of projective drawings. Drawings have the benefit of time economy. Unlike objective tests, which can take very long and are very draining, drawings are a quick assessment, and although they can never be viewed in isolation, to a skilled interpreter they do provide a time effective manner to gather rich information from a client.

THE WHEN AND THE WHERE OF PROJECTIVE DRAWINGS

Dana (1982) emphasises the use of projective assessment techniques from a humanist perspective. From a humanist perspective, it is important to remember that an assessment is merely a picture of a person’s current phenomenological reality. By implication, this means that as we change, so too will “objective” assessments of us differ. If we continue along this line of reasoning, we see too that a projective drawing assessment will provide only one view of the full human landscape. It is therefore imperative to realise that a projective drawing assessment will never stand
alone, but will be included in a comprehensive battery of assessments, both objective and subjective, which will allow the assessor to obtain the fullest possible view of another person’s experiential world.

As noted above, there are certain distinct advantages when using drawings in assessment. These advantages will guide when and where projective testing will be useful. Within the assessment situation, or the therapeutic encounter, it falls within the discretion of the psychologist to decide when projective testing will be most useful. There are situations where the use of drawing might be of little use, or even damaging.

The question that remains is: What is the scope of projective testing, and where is its place in the overall picture of psychological assessment? Korner (1965) makes a very important point in her insistence that the merit of projective testing lies not only with the degree to which a particular test measures the dimensions and potentialities of an individual. The test is only as good as the skill and clinical insight of the interpreter (Korner, 1965). Inference and insights based on projective drawings are only as good as the assessor’s training and familiarity with this method of assessment, not to mention a thorough insight into the psychoanalytical underpinnings of projective assessment. This restricts the scope of projective testing, that is, the assessor must be competent and skilled at what she does, and not merely able to follow a “paint-by-numbers” approach to the assessment.

Korner (1965) further states that projective drawing assessments can assist with differential diagnoses, but only insofar as they are part of a comprehensive battery of assessments. These assessments offer the clinician a tool for exploration of a client’s fantasies, attitudes, aspirations, identifications and preoccupations. Korner (1965) insists that projective techniques potentially have a very high diagnostic validity, and are most useful instruments for exploration of inner fantasy life.

Crumbaugh (1990) is of a similar mind, going so far as to say that in comparing psychometric (objective) testing, and ideographic (primarily projective) assessment, given unlimited time and facilities, a skilled clinician could learn more from projective techniques than from the standardised, statistically normed testing techniques. However, it is important to note Crumbaugh’s caveat: “if we had unlimited time and facilities for observation, we could learn more about personality by this procedure than by any type of test” (1990, p. 9).

This conceptualisation of the scope of projective drawings is reinforced by Oster and Crone (2004). They emphasise that projective drawings must function within a battery of psychological tests, but also that projective drawings hold an extremely important place within this battery. Drawings may serve as a non-threatening introduction to the assessment, but have a great yield in information nonetheless (Oster & Crone, 2004). Within the assessment process, drawings offer a non-verbal bridge between the psychologist and the client. Drawings offer another window into the inner world of the client, one which might not be accessible to any other technique.
This window offers a view of: the current level of functioning, the inner world of the client, the intellectual status of the client, and the emotionality of the client. For certain individuals, this window might be accessible only through drawing-type assessments. But, in closing this section, it is imperative to remember that a drawing, or a series of drawings, can never be seen in isolation from the rest of the assessment or therapeutic process (Oster & Crone, 2004).

A CRITIQUE OF PROJECTIVE DRAWINGS

In this section, I will not list particular weaknesses of projective drawings. These are easily enough inferred from the above discussions regarding the scope of projective drawings. In general, reliability and validity are most often cited as being problematic (Oster & Crone, 2004). Instead, I would like to refer particularly to Swensen (1965), who provides a very thorough critique directed at human figure drawings.

Clifford H. Swensen conducted his own empirical evaluation of human figure drawings, and concluded from his findings that the assumptions behind human figure drawings are entirely false. His view is an extreme one, but it is always important to look at both ends of an argument before drawing conclusions. Swensen (1965) concludes from his own research that “the basic premise that the drawing of any part of a human figure involves the projection of important psychological characteristics has not been empirically demonstrated” (p. 609).

It is a basic assumption of projective drawing assessments that an individual will view the world in an anthropomorphic manner, that is, from her own point of view (Hammer, 1981). Swensen questions this assumption, asking why the “body-image” hypothesis assumes that when we draw a figure, this figure will represent the drawer’s perception of herself. This is a valid question, and one not easily answered. The premise behind human figure drawings is that we have an image of ourselves in our mind, and that this image is the one we draw on paper, however distorted by our conscious or unconscious processes it may be (Gorman, 1969). Landisberg (1969) concurs with this view that the drawing of a person is a form of self-portraiture. It is much easier to find arguments in favour of the “body-image” hypothesis (Gorman, 1969; Hammer, 1981; Landisberg, 1969), than to find arguments against the fact. However, just because most are in favour of an argument, this does not make it more correct, and Swensen’s view should at the very least be given some consideration.

Although Swensen’s (1965) view of human figure drawings is scathing insofar as the empirical basis behind some assumptions, he does conclude that there may still be some value in human figure drawings. First, human figure drawings do have a place as part of a diagnostic battery, but only insofar as the battery is composed of many other tests and behavioural data. In addition to this, the drawing cannot provide data which may aid in diagnosis, but rather collaborative data. Swensen (1965) is also of the view that figure drawings may be used as a rough screening device to
gauge an individual’s general level of functioning, possibly useful in directing the clinician towards psychosis and organic brain dysfunction.

I would like to advance one further critique. Due to the simple nature of the administration of a drawing assessment, it is highly tempting to use this type of assessment without discretion. If such a test is administered and interpreted by someone who is not skilled enough to understand the process and use discretion in interpretation, might a projective drawing not do more harm than good?

TYPES OF PROJECTIVE TESTS

Psychological tests are divided into two groupings, objective and subjective tests (Crumbaugh, 1990). Objective tests are also psychometric tests, and these are the tests which are fully standardised and statistically normed. These include intelligence tests and personality inventories. Subjective tests are tests which are more open to a psychologist’s interpretation, and these include projective tests (Crumbaugh, 1990).

Crumbaugh (1990) divides projective tests into four different types. The first are projections into ambiguous stimuli. The stimuli could be for any sense modality, but most are visual, such as the Rorschach Inkblot Method. The second are projections into expressive movements, in which every expressive response is seen as a function of personality. This includes kinesics, which is the interpretation of psychomotor behaviour such as gestures and postures, and graphokinesics, which are writing, painting and drawing techniques. The third type of projective testing includes projections into both ambiguous stimuli and expressive movements. This includes tests such as the Bender Visual-Motor Gestalt Test, which allows for interpretation on more than one level. The fourth type of test, according to Crumbaugh (1990) is projections into self-reports. These include certain psychometric tests, such as the Minnesota Multiphasic Personality Inventory (MMPI). The author argues that although the test is scored objectively, certain results must also be scored globally or by the clinician’s intuition. This final category is somewhat confusing, and is at odds with other typologies of projective tests.

Rabin (1981) divides projective tests into five different groups, which are more easily understood. These are association techniques (e.g., Rorschach), construction techniques (e.g., Thematic Apperception Test (TAT)), completion tests (e.g., sentence completion), choice ordering techniques (e.g., Picture Arrangement Test) and expressive techniques (e.g., drawing).

Based on these two typologies, it seems that there is some overlap between categories in projective testing. Projective drawing assessment may, according to the above information, fall under either the graphokinesic banner, or the expressive technique banner. In the next section, we will be looking at three drawing based projective techniques in more detail: draw-a-person (DAP), draw-a-person in the rain (DAPR), and the kinetic family drawing (KFD).
THE WINDOW OF PROJECTIVE DRAWINGS

In general, drawings of different types provide rich information for the skilled clinician. Drawings can provide a clinician with an overall view of the client’s level of development, based on certain characteristics within the picture (Oster & Crone, 2004). Drawings also provide a good estimate of the intellectual maturity of an individual, and specifically so with children. From a global viewpoint, drawings also provide the clinician with signs and indicators of the client’s emotional state. In addition to the actual drawings, behavioural observations made during the assessment process provide valuable extra information to generate a holistic view of the client (Oster & Crone, 2004).

Machover’s Draw-a-person test

Florence Goodenough was a forerunner in understanding the value of children’s drawings. However, it was Karen Machover who in the 1950s adapted the DAP for personality description and interpretation, in addition to the intelligence interpretation already conceptualised by Goodenough earlier (Oster & Crone, 2004). The DAP is believed to reflect a person’s self-concept, portraying unconscious projections of conflicts and concerns onto the human figure drawing. Poor reality testing may also be assessed based on the presence of certain characteristics within a drawing.

The instructions and materials necessary for the DAP are very simple. Paper and pencil are provided, and the instruction is simple: “Draw a person”. Different clinicians have different preferences on how to give instruction, but the crux of the matter is that the instruction must be neutral and ambiguous, so as not to guide the individual in any way about how to draw. After the testee has drawn a person, she is then instructed to draw someone of the opposite gender. If the client drew someone of the opposite gender initially, she will now be asked to draw someone of her own gender. This should also be kept in mind during interpretation of the drawings. During the drawing process, clinicians must watch in which sequence the drawing is made, and note any other details of the drawing process, such as excessive erasing.

Drawings are interpreted on the basis of chronological age, developmental maturation, emotional status, social and cultural background, and other relevant history. Also, observations during the drawing process must be incorporated into the interpretation. It is important to remember that although certain details and signs in the drawing may indicate certain underlying processes or traits, there is no definite relationship between the presence of one indicator (e.g., heavy shading in the picture) and possible reasons (shading perhaps indicating anxiety). These conclusions can only be made within the context of the entire assessment battery, and with sufficient collateral information (Oster & Crone, 2004).

Oster and Crone (2004) note that the following are clues which might draw a clinician to the conclusion of poor reality testing, and should be further examined:
(a) drawings of bizarre facial features; (b) nonhuman, robot-like characters; (c) strange or mysterious symbols in the drawings; (d) depersonalised, empty faces on the drawn figure(s).

In drawings, clinicians must be sensitive to possible indicators of sexual abuse. It should be emphasised that a diagnosis of abuse cannot be made based on the interpretation of drawings alone, but rather that drawings may guide a clinician to further exploration of the topic (Oster & Crone, 2004). When interpreting these drawings, it is important to keep in mind the chronological and developmental age of the individual. Some clues with regard to sexual abuse could be: (a) sexual connotation in content, images of genitalia, emphasis on the pelvic area’ (b) heads without bodies, or bodies with omitted lower halves; (c) encapsulation or enclosing of self; (d) phallic shapes; (e) certain shapes, such as hearts, circles and wedges; (f) drawings indicating self-depreciation; and (g) repetitive marks and blending (Oster & Crone, 2004).

**Draw-a-person in the rain technique**

The DAPR was designed with the goal of eliciting an impression of emotional vulnerability of a client, when placed within a symbol of an environmental stressor, in this case rain (Oster & Crone, 2004). The technique is intended to assist the clinician in assessing the degree to which an individual is experiencing internal tension and how well they are able to cope when further external pressure is added. Interpretation of the person in the drawing is done according to the same principles as the DAP technique. Further interpretation is based on the person’s emotional defences being symbolised by protection from the rain, which could be clothing, an umbrella, a roof, and others (Oster & Crone, 2004). The rain is also interpreted as a symbol of how the individual views stressors. Other factors, which have already been explained in the DAP, such as behavioural observation, must also be kept in mind in the interpretation of the DAPR.

Some questions a clinician may aim to address through a DAPR interpretation are: (a) How will this person respond to stressful situations? (b) What kind of resources does this person have to help her deal with stressful situations? (c) How does this person plan to deal with situations which are considered stressful, and is she able to deal effectively with anxiety-provoking situations? (d) What defences will this person use when she is confronted with unpleasant situations? (Oster & Crone, 2004).

**Kinetic-family-drawing technique**

The KFD combines a regular family drawing with the instruction for everyone in the family to be doing something together (Crumbaugh, 1990). The KFD reveals attitudes towards other family members, and the client’s perceptions of family roles (Oster &
Crone, 2004). The assumption is that the various positions of family members, what they are doing, and their positions in relation to one another all reveal something about the client in her family setting. Again, interpretation is holistic, and factors such as those mentioned in the DAP should be kept in mind during interpretation.

Oster and Crone (2004) draw our attention to some clues which may help guide interpretation of the KFD. These include (a) the proximity of the client to others in the drawing, (b) omission of family members or self from the drawing, (c) the proportions of family members in relation to one another, (d) facial expressions of those in the drawings. In addition, the basic interpretative techniques used in the DAP are also applicable to the drawings of families.

CONCLUSION

In this article, I have argued that projective drawings offer a punctuation point from which to view a client, tapping into a client’s personality through creativity. In some cases, it may very well be that a picture is worth a thousand words. However, projective drawings are only truly of value if they are interpreted by a clinician with enough skill and insight, and that these drawings can never be seen in isolation, but must be viewed from a global approach to client wellness. Some (Oster & Crone, 2004) believe that drawings are extremely useful, while others (Swensen, 1965) see no empirical evidence to support such a view. In conclusion, the final validity of a drawing might best be judged based on its helpfulness in the assessment and treatment of a particular individual, inasmuch as that individual’s therapeutic journey is somehow improved by the use of such methods.

BIOGRAPHICAL NOTE

Stephanie Terre Blanche is currently in the process of completing her second year of Master’s in Clinical Psychology training in the Department of Psychology at Unisa. Her interests include postmodern and narrative approaches to therapy and research, equine-assisted psychotherapy, and issues relating to gender in psychology.
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