

PART I

DEFENSE MECHANISMS
AND THE NORMS
OF BEHAVIOR

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CHAPTER

1

In My Defense

In art therapy one accepts as basic to treatment the psychoanalytic mechanisms of repression, projection, identification, and sublimation (Naumburg, 1953). These mechanisms, used unconsciously, are incorporated to defend against feelings of anxiety that have become uncomfortable, humiliating, or shameful. Removed from the ego, experiences may be isolated, but they are never forgotten. They creep into our relationships and have the power to both protect and stifle. This repression, however, “will make itself felt sooner or later in some manner if it is at all vital to . . . development” (Whitmont, 1969, p. 107).

It is to this end that the art experience offers its invaluable service. The ability to vent emotions through the process of art allows for both distance and perspective. As Judy Rubin (1984) points out, “in the doing part of art therapy, patients do not talk about feelings or relationships from a distance, but they get into them and feel them” (p. 140). Thus, art therapy allows the therapist and the client to embrace these defensive measures by making them part of the treatment plan.

An example is the utilization of directives that target specific defenses. If we focus on repression, the withholding from consciousness ideas, impulses, or feelings, a perfect directive would be as follows: “Draw all the things you think of that you don’t want to think of.” In the same vein, a directive for displacement, whereby an unacceptable emotion is transferred from one object to a more acceptable substitute, could be “When something bad happens at (home), show how you handle it at (school/work).” The ability to design directives around an individual’s defense is endless and is only hampered by a lack of imagination.

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To state it simply, one must tailor the directives to match the patient's expression. The goal is to think and create in the client's language. Thus, if clients offer defenses, we reply with metaphor.

In this chapter I have chosen the most common defenses that I have encountered in my work and in the supervision of others. This list, however, is by no means exhaustive, nor have I adhered to a strict Freudian classification. Since Freud's initial theory of repression appeared in 1894, and since his reformulating of it in 1926, numerous clinicians have emerged with their own descriptions.

Currently, there is consensus among researchers regarding the following aspects of the defense mechanism construct.

1. An overall definition of a defense is that it is the individual's automatic psychological response to internal or external stressors or emotional conflict. . . .
2. Defenses generally act automatically, that is, without conscious effort. . . .
3. Character traits are in part made up of specific defenses which individuals use repetitively in diverse situations. . . .
4. A process of consensus has favored those defenses manifesting clear, nonoverlapping definitions, reliability, and demonstrated empirical findings.
5. Defenses affect adaptation. Each defense presumably is highly adaptive in certain situations. . . .
6. When defenses are least adaptive, they protect the individual from awareness or stressors and/or associated conflicts at the price of constricting awareness, freedom to choose, and flexibility in maximizing positive outcomes. . . .
7. Despite the use of developmental terms to describe groups of defenses, such as immature or mature, the question of whether defenses emerge in a certain normative developmental sequence represents an empirically open issue. (Perry, 1993, pp. 277–278)

In addition, Perry (1993) speaks of psychologists' attempts to include a sixth dynamic axis in the *Diagnostic and Statistic Manual of Mental Disorders*, fourth edition (*DSM-IV*): "An axis for defenses appeared to be the most clinically useful possibility with consistent scientific support" (p. 298). Of course, this has not occurred, but arguments for such an inclusion range from the ability to measure prognosis to a method of classification to guide treatment and treatment planning.

Just as defense mechanisms tend to be organized hierarchically, from maladaptive to adaptive, they are often associated with specific personality traits. Valliant and Drake (cited in Jacobson & Cooper, 1993) focused on

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Axis II personality disorders and found that immature defenses were present in over 60 percent of the population studied, versus 10 percent who were not diagnosed with an Axis II disorder. With regard to Axis I disorders, studies point out that select defenses have shown correlation, both positive and negative (Jacobson & Cooper).

What does any of this have to do with art therapy? Everything. The use of art therapy allows clients to break through their well-honed defenses and provides an emotional release. If we look at symbolization, in which one object or idea is employed to represent another, the art product is the symbol. If we review projection, the client is able to project verbally unacknowledged feelings through his or her creations. With the neurotic defense of asceticism impulses are denied to such a point that masochistic pleasure can become a source of gratification. Thus, the prohibition of instinct can be safely expressed through the completion of directives, found tolerable, and, in the later stages of therapy, practiced without the media.

Before we discuss select defense mechanisms, I would like to state that the following drawings could be analyzed on many different levels (e.g., interpreted for their disparate elements and general characteristics, along developmental lines, as a complete body of work, as an aid in diagnosis, etc.). However, for the purposes of this chapter we will only be analyzing them as they relate to the client's defenses.

Intellectualization

Intellectualization is defined as an emotional response, or impulse, that is controlled by thinking instead of experiencing. The thoughts are a protection, or defense, against anxiety due to unacceptable impulses. "Intellectualization seeks to make a connection between drives and ideational content. In this way drives are perceived as more under ego control which can operate in the area of words and intellect as an active coping device to handle aggression" (Malmquist, 1985, p. 58). Simply stated, this defense is the discharge of aggression or other unacceptable emotions in response to signal anxiety. Often, intellectualization is noted in clients with obsessive traits.

If we return to Figure I.4, it can be said that this adult male employed intellectualization in his relationships with others. He would sermonize with a passion on any topic, especially those having to do with religion or philosophy, and confuse the lower-functioning patients to no end. By so doing he never had to face his own life failures, frustrations, or crises. Yet, when he was left without the ability of speech, alone, to quietly create, the affect

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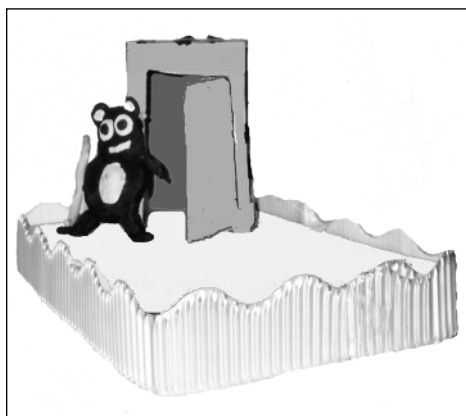
escaped without his permission. Out of his comfort zone, faced with the artwork, no longer able to rationalize his neurotic defense, he momentarily allowed himself to experience the feelings of fear.

In another group therapy example the same patient created a clay bear standing before a construction paper home (Figure 1.1).

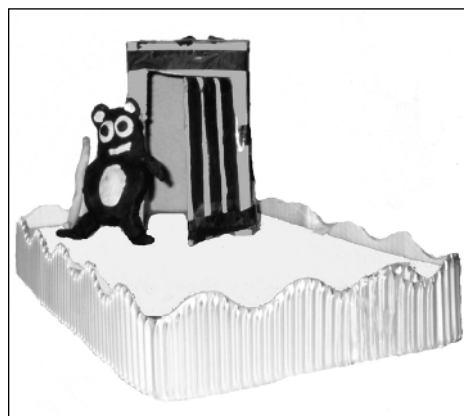
In the following group session the members were instructed to pass their creations to the member on their right, and that group member was to add to the original artwork. Figure 1.2 shows what this patient's neighbor added to his figure.

As I watched this project in progress, I could not help but notice that the once-orange home now looked like a prison, while the panda took on the role of jailor. Once the projects had been passed back to the original artists, they discussed what they thought of the additions (see Figure 1.2). This man stated, "I like it. It looks safe and secure." The rest of the group heartily agreed. When I pointed out that the house now looked like a prison, I received explanations from "that's how siding looks" to excuses that blamed the materials. Beyond the obvious ego regression that institutionalization had created (this is discussed later in the chapter) not one person saw the "bars" as foreboding or related them in any way to their situation. These rationalizations were obviously necessary to the patients, for, as Malmquist (1985) states, "rationalizations and displacements are often required to maintain the intellectual position, perhaps because the defense is being challenged in discussion" (p. 58).

Another example is taken from a mural drawing. Each of the five members of this group was instructed to draw an animal; they then passed the drawings, completing various tasks to promote interaction, until the sec-



1.1 *At Home*



1.2 *Safe and Secure*

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ond-to-last person was instructed to make a friend for the animal. All the renderings were given back to the original artist, and the group had to fit all the different images into one cohesive mural. With this project I did not intervene or make any suggestions throughout the process. Figure 1.3 shows the completed project.

As we look along the bottom of the mural, we see a horse, multiple cats, two people, and an exceedingly small monkey hanging from a tree on the viewer's left. As we move to the viewer's right, a lion and lioness are poking out from behind foliage. In back we see two roaming dinosaurs, with seagulls flying above. Beyond what each animal implies symbolically about the creators, the mural has two definitive species—those of predator and prey. As the group had to problem solve and fit all these items into one purposefully very small area, the discussion mainly surrounded the dinosaurs and where to put them. The lion and lioness were largely ignored because they were not “in plain view.” Some of the members wanted the dinosaurs on the baseline of the paper; this, however, was dismissed since they could hurt the people and domesticated animals.

They then argued over how to contain these predators. One member suggested a fence, but the other four members quickly rejected the idea. As a compromise, the group created a lake and added rocks to keep the ani-



1.3 Group Mural

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imals at bay. Note how the rocks are drawn: gingerly placed as stepping stones instead of as a means of containment. In the end only one group member continued to assert the fact that the dinosaurs needed to be fenced or they would “destroy others.” Just as with Figure 1.2, this group began to arrive at excuses and rationalizations of why the dinosaurs would not do anything so violent. Just as with intellectualization, in order to defend against their anxiety they employed this excess of thinking. The need to protect against unacceptable impulses, or situations, is so strong that even man-eating dinosaurs can be tamed if we think hard enough.

One of the few images to bring a consensus of affect was Figure 1.4. This group of eight adult males was given the directive “Create a free drawing to represent any feeling you choose.”

This patient, an adult male, was diagnosed as a paranoid schizophrenic. At this juncture in his treatment he was stabilized on medications but had a tendency toward thought blocking and disorganized thinking. This patient’s main defense was introjection.

In assessing this drawing we see an extremely powerful-looking and muscular male standing in his cell while the cinderblock wall both frames and encloses his body. Suffice it to say that this rendering was not well received. While the patient spoke of jail time, he spontaneously began to explore his feelings of loneliness and fright. The group, in a common voice, implored



1.4 Feelings of Loneliness

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him to “put that away,” adding, “that’s awful. . . . I don’t even want to think about that.” Faced with the group’s reaction, the patient laughed, apologized, and retreated into his pattern of self-punishing behaviors.

Conversion

This basic ego defense is popularly defined as an emotional conflict that has been transformed into a physical disability. However, the symbolic guise of conversion is not measured merely in terms of somatic complaints. Laughlin (1970) has offered the most comprehensive definition, which I will utilize for the purpose of this section.

Conversion is the name for the unconscious process through which certain elements of intrapsychic conflicts, which would otherwise give rise to anxiety if they gained consciousness, instead secure a varying measure of symbolic external expression. The ideas or impulses, which are consciously disowned, plus elements of psychologic defenses against them, are changed, transmuted, or converted usually with a greater or lesser degree of symbolism, into a variety of physical, physiologic, behavioral, and psychologic manifestations. (p. 32)

He further delineates six types of conversion behavior. We shall be exploring the fifth and sixth: conversion delinquency and antisocial and criminal behavior. These classifications “result from unconscious impulses, seething resentment, and hatred being converted so as to erupt into external violence” (Laughlin, 1970, p. 38).

The case we will discuss revolves around a teenaged girl who found herself placed in a residential treatment center for two counts of assault, both against family members. The minor’s parents had divorced by the time she was a toddler and her biological parents fought over guardianship for numerous years. Eventually, she was transitioned into her mother’s home with her half-sister and stepfather, on a permanent basis. By late latency her stepfather began molesting her; she told no one for months. However, once she found the courage, her mother immediately reported the abuse and her stepfather turned himself in that day. Since then, the client has verbalized feelings of guilt for taking away her mother’s husband and her sister’s father. Prior to her arrest the client was involved in private counseling to address the molestation issues, which the client felt she had sufficiently discussed. Yet her behavior spoke to the contrary. She had adopted the role of the parentified child and not only mediated between her biological parents, but would act as caretaker to her younger half sibling. She

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possessed a warm and sunny disposition and was involved in numerous team sports. Overall, she was the perfect student, the perfect sister, and the devoted child. Yet she had repressed the traumatic experiences until they had been not only disguised, but also symbolized through the external expression of flawlessness. However, when faced with a failure, she lashed out toward the world all that had been unconsciously hidden. The shame and guilt once again tucked safely away she returned to the perfect student, the perfect sister, the devoted child.

This resistance to exploration (even though she was exceedingly verbal) and the abuse and ensuing conflicts proved an obstacle in therapy. So thoroughly had she repressed her anxiety that verbal therapy was ineffective. It was at this point that an art project was introduced. The client was given plasticene clay and told to make anything that she wished. Figure 1.5 shows what she created in the first session.

What do you see? What visceral feeling or thought comes to mind? When interpreting art, this is an important ability to develop. At this juncture the mortar and pestle were viewed as a symbolic penis and vagina. The function of a pestle is to grind, pound, or stamp; therefore not only its shape, but also its practical use was taken as a representation for this client's sexual abuse. It is important to note that this interpretation was not made to



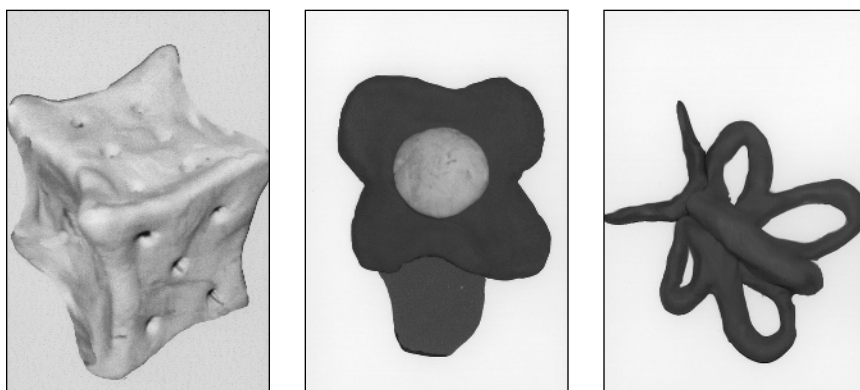
1.5 Mortar and Pestle

the client. Instead it was simply identified as one possibility and noted for future reference.

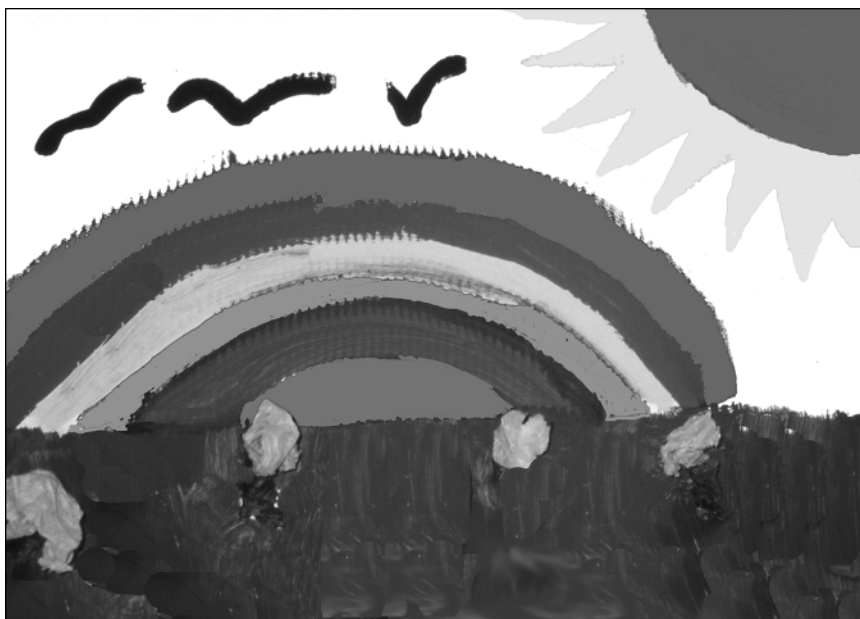
As outlined earlier, symbols cannot only be construed through a common understanding (i.e. the dove as a symbol of peace) but they are intensely personal. The image of the mortar and pestle is not one most teenagers gravitate toward. Thus, it was surmised that this represented a personal symbol that would need to be taken into account with the final art production. In the next session clay was once again offered and she created three items—the die, flower, and butterfly (Figure 1.6).

As with the first session, no interpretation was given; she was simply allowed to create as much or as little as she chose. These three items were then assessed next to the mortar and pestle figure. Was the die an attempt to convert into oppositional behavior due to the dislike of the art project? Were the flower and butterfly her attempt to rectify her angry emotions (reaction formation)? Was the die perhaps a symbol for her feelings? Note there is only one, not two. Was it a wish that her emotions could just “pass away?” As these were clearly personal symbols, there was no way of knowing without directly interpreting and exploring, and due to her level of repression this was not a prudent choice. Thus, a decision was made to provide her with containment. If she were truly converting the repressed memories of her sexual abuse, she would need something to surround the welling up of feelings. In other words she would require a symbolic boundary where she could safely place her anxiety and anxious thoughts. Thus, heavy cardboard and paint were introduced. The clay remained available, however, the focus was now placed on making a painting. Figure 1.7 is the painting that she created.

The tissue paper creations on the bottom half of the painting are trees.



1.6 Feelings in Clay



1.7 Converting Memories of Sexual Abuse

She then went on to make a clay figure (Figure 1.8). This, she stated, was a “man without a body.” It is completed in a primitive style, a circular mass with eyes and mouth, devoid of detail it has the power to bring forth what one sees (remembers) and not what is actually present.

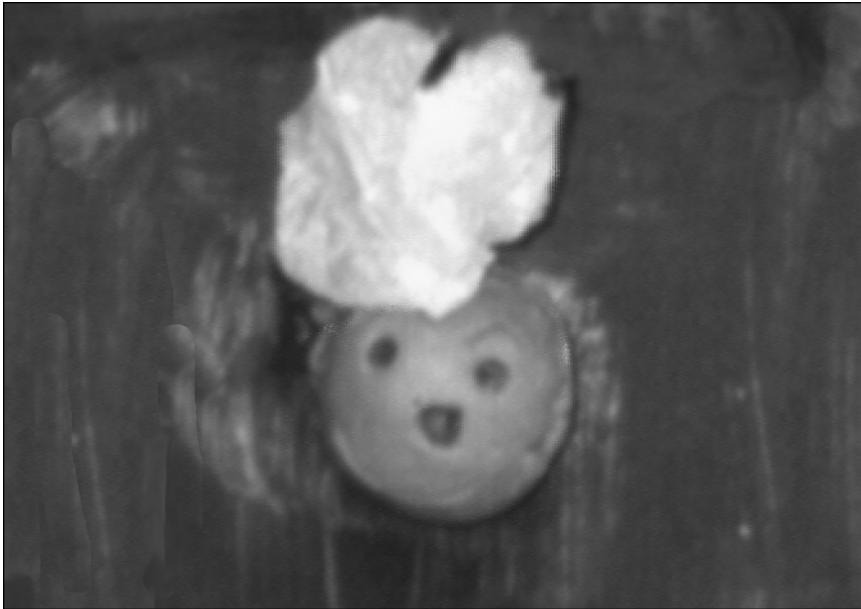
In the ensuing session (Figure 1.9) she placed all the disparate clay productions (i.e., the die, mortar and pestle, and now the bodiless man) into some order. A new addition was the “Hot and Spicy” wrapper that at first she placed below, changed her mind, and fixed under the sun.

As with Figure 1.5, examine the final art product. These items that she had made singularly have now been placed into a cohesive order. Thus, where she placed an item, where she chose not to, how she arranged the figures, both in proximity and distance, all take on significance. It is at this point that the whole must be taken into account.

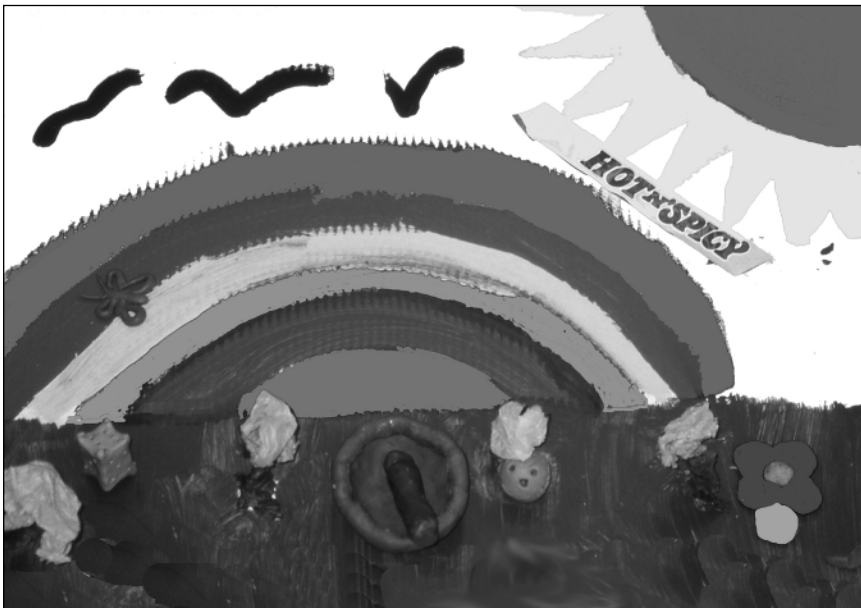
What is your first impression?

Note the closeness of the “bodiless man” next to the symbolic genitalia. Note the feeling. Why place a candy wrapper into the picture? And if doing so is necessary, why place it under the sun?

After having looked the entire image over, take your hand and block the lower third. What a very different image this mixed media production



1.8 *Man without a Body*



1.9 *Hot and Spicy*

becomes. A rainbow bursting with color spreads across the page while three birds and a butterfly move freely. The only image out of context is the “Hot n’ Spicy” wrapper glued into place under the oversized sun’s rays. While making the image the client struggled with where to place this wrapper and initially wanted to place it on the lower third.

Now hold your hand over the upper two thirds of the page and notice the linear quality. Everything forms a straight line across the bottom of the boundary. Green tissue paper trees look like explosions, especially directly above the bodiless head. At the end of the line rests a single red flower.

There are numerous ways that this project could be interpreted. It could be taken apart, dissected, and assessed in a singular fashion (i.e., from a standpoint of general symbols and their understanding: the sun being representative of parental love and support, a source of warmth, butterflies being associated with the search for elusive love and beauty, flowers representing a need for love and beauty, color symbolism, etc.). Or it could be explored from a position of personal symbolism and the client’s free associations with the mortar and pestle, the bodiless man, and the affect generated. Or, finally, it could be assessed from the point of view that the abuse, rather than having been explored and processed, was quietly and efficiently repressed, and any direct interpretation or questioning would produce a multiplicity of verbal statements, all designed to minimize the experience. In this way, the shame and guilt all converged into a host of defenses (i.e., conversion, intellectualization, reaction formation) that provided a safe forum where the traumatic memories were not relived.

Yet who but the client can decide the path of therapy? Therefore, utilizing the art as the product of transference, the therapist gently questioned her. Her response to how the mortar and pestle fit with the image was dismissal; she didn’t know. This reply offered all that the therapist required. She was not ready to allow this intensely personal symbol to be explored—not directly, at any rate. It is interesting to note that the client sat quietly after the question for quite some time, after which she stated, “Can we now please not do this any more and go back to your office and talk?”

In the office she followed through on her statement and slowly began to discuss the molestation with less intellectualization and more process. Whether the art was the impetus for this is up to you to decide.

Condensation

As previously discussed, symbols are the cornerstone of art therapy. The nonverbal language of symbols speaks to us on a multiplicity of levels and

incorporates not simply one memory, object, or feeling but many, which are united through the unconscious process of creation. This emotion and affect give the art its power. It is in this vein that we arrive at condensation, often classified as a minor ego defense. It is defined as a process by which “several concepts, ideas, or needs are condensed in their figurative representation so that a single symbol, object, or figure serves to stand for them. . . . Through the telescoping operation of Condensation one object, figure, or symbol can represent several” (Laughlin, 1970, p. 455).

In art therapy condensation takes on significance beyond its standing as an ego defense. The created symbols allow access into the unconscious, which frees the clinician to unearth the process instead of remaining tied to the content of a client’s verbalizations or behavioral acting out. In this manner a singular clay object, multiplied, destroyed, and rebuilt does not merely become a symbol of the destructive path encountered by one youth; it also provides a safe forum in which to express his guilt, pain, and fears.

Figure 1.10 begins a case study of a late adolescent male who had spent the majority of his life in large institutions or group homes. In addition he was a shame-based, highly impulsive youth who preferred the role of victim in his social relationships. Often he would taunt and antagonize peers and adults until he was rejected. In this manner he recapitulated the familial dynamics of approach and avoidance. This chaos then projected onto his current “family” of peers and adults allowed him to control the ensuing rebuff, thus offering him a sense of power within his environment.

With each passing day, as he approached the age of majority, his fear increased. He made frantic efforts to avoid abandonment through regressive characteristics. He became hostile, rude, and belligerent, with rapid shifts that characterized emotional instability. He refused to attend group therapy and was withdrawn and resistant when seen individually. Unable to cope with impending adulthood, he had regressed to childhood. At this point the treatment team decided that he required less verbal and increasingly tactile interventions that would provide him with a sense of reparative mastery as well as meeting his developmental needs of separation and individuation. Thus, art therapy was introduced. Over the next nine sessions he was given plasticene clay and instructed: “make anything you want.”

The client had a multiplicity of color choices but decided to work with blue and minimally added red to the microphone. He did not offer any information about his creations, and the therapist did not question him about them. These early art therapy sessions were simply utilized as a holding environment, while the clay figures were utilized as transitional objects.

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1.10 *The Blue Man and the Anger Microphone*



1.11 *The Blue Man and the Butterfly*

In the second session the client retrieved his art production and proceeded to smash the background figure. This was not an unexpected occurrence, as it was certainly in keeping with his identification with the victim as well as being an action related to his feelings of abandonment depression. Thus, each time he destroyed the figure, the therapist quietly remade it. The therapist made no verbal reproach and expressed only toleration for the ambivalent feelings. This cycle continued five times, until the therapist began work on a butterfly. Once this was completed the session ended.

In the third session the client was once again introduced to the clay productions. He spent his time fixing the figure the therapist had initially restored. This exchange was an important one in the relationship. The therapist, having lent her ego to the client symbolically, showed him that nothing was irreparable. The client, having been allowed to vent his anger and aggression without rejection, symbolically apologized through a sense of industry (repairing the damage) instead of assuming the inferior role. At the end of the session the client placed the butterfly on the now-repaired person (Figure 1.11).

At this point the client had not identified the figures, and due to his regressive features he was not pressed for clarification. However, in the fourth session he voluntarily offered an explanation. Figure 1.12 shows all the productions made to this point, with two new additions.

While the client worked on the white figure, the therapist made a second butterfly (found at the white figure's feet). The client stated that the "Blue man's sad." While the white man scolds the blue man for his indiscretions, "He tells him to do the right thing. They fight but they make up." The figure in the foreground he identified as a microphone. He simply stated, "This is the blue man's anger. He's sad when the anger comes out."

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At the conclusion of the session the client placed the therapist's butterfly on the anger microphone. Needless to say, his description is replete with symbolism. His emotions and social relationships have been condensed into the clay figure representations. The therapist embodies the butterfly and the white man (superego figures), while the client resides in the blue figure as his anger is magnified through the microphone. Overall, these contradictory emotional states exist not only side by side but also within the client and, in this instance, his transitional objects. This splitting continues to be the cornerstone of his rage, fear, and guilt. The following two sessions (encompassed in Figure 1.13) show his continued compartmentalization.

In the background a blue home ("where everyone relaxes and plays") is placed in close proximity with the white home ("where they sleep and eat"). A red garage (center) protects the car so the "Blue man can fix it in safety."

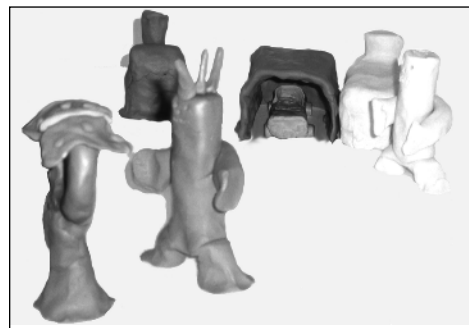
In the fifth session the client had made a blue lake; however, after the therapist informed the client that she would be on vacation for a period of two weeks (in the sixth session) he destroyed the lake. It is interesting to note that water, in modern psychology, is frequently viewed as a symbol of the mother or the female side of the personality.

Upon the therapist's return, the project was resumed and Figure 1.14 was completed.

The client worked quietly, with a flat affect, and created a snowman (placed in the background on the viewer's right) and added black clay to the white home. He stated, "This is the place you can go and discuss your feelings." He then began to explore the art room and added a feather and plastic wheels to the car. However, as the session progressed, he became increasingly agitated. He then destroyed the therapist's butterfly and the anger microphone, saying, "I don't need them." This regression is typical

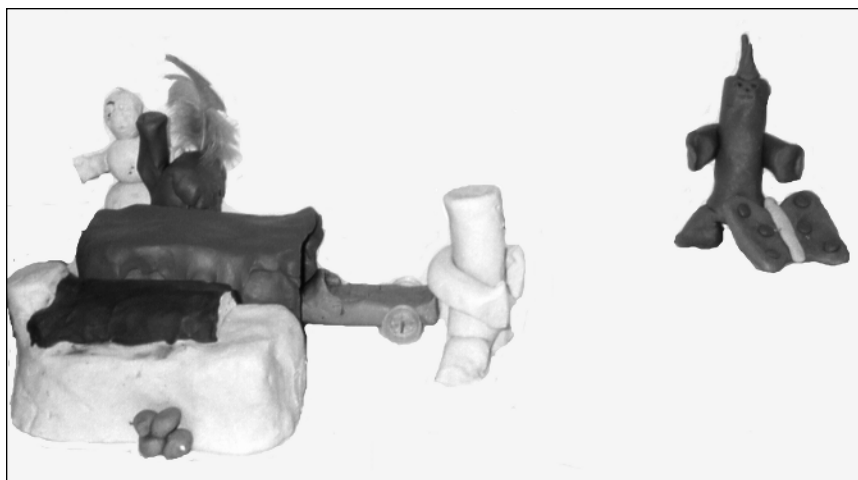


1.12 *He Tells Him to Do the Right Thing*



1.13 *Compartmentalizing His Emotions*

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1.14 *Abandonment Feelings Well*

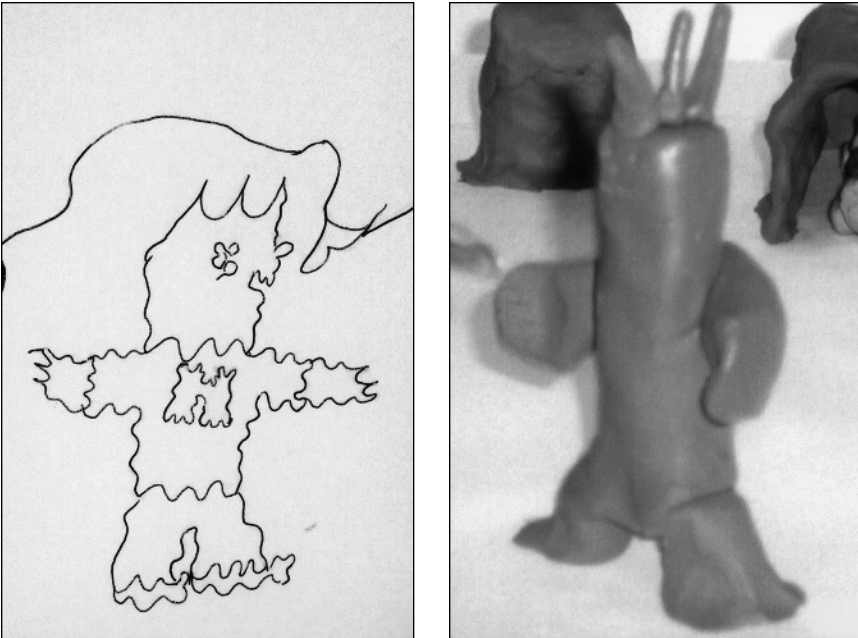
when abandonment feelings well from within, but the black roof added to the white building gave room for hope.

At this point the therapist remade the butterfly and stated, “The butterfly came back and now it’s stronger.” This use of metaphor was less intrusive than if the therapist had attempted to explore the client’s feelings of loss and abandonment in a direct manner. After noting that the blue man was now completely separated from the other objects, the therapist placed the butterfly at the man’s feet (object constancy), and this ended the session. Once again, no verbal discussion was imposed; only symbolic gestures and verbal metaphors would be utilized until the client felt safe and comfortable.

In the eighth art therapy session the client was once again presented with the clay objects, but he stated that he didn’t want to work in clay any longer: he wanted to make a picture. He sought out poster board and chose pencils (a very controlled medium) and drew the image on the left side of Figure 1.15. The writing above the wavy-lined man says, “Talk about how you feel.” He carefully placed the completed drawing behind the clay objects and spoke briefly about the picture. The client stated, “This is how anxious people draw.” Note how similar this figure is to the blue man that represents the client (right side of Figure 1.15).

The initial on the wavy-lined man’s chest (digitally changed) belongs to the client, and this reinforced the therapist’s interpretation that the men that the client was making all symbolized aspects of him. It is also noteworthy that at this juncture the client wanted desperately to give up the

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1.15 *The Symbol Remains the Same*

transitional object (clay men) yet was unable to, and thus utilizing a new medium (drawing) continued to yield the same symbol. He was, however, attempting to move toward autonomy, and therefore his assertive actions were met with approval and acceptance.

In the last art therapy session the client returned to the clay project and spent an inordinate amount of time on the car. He detailed it with headlights and moved it around the area in play. He then gave the white man (superego symbol) eyeglasses and stated, "Now he can see better." He then added a heart to the white man and snowman and positioned the blue home and man (negative aspects of the self) in the background. As we look over the completed project (Figure 1.16; see disk to view in color), the created symbols represent not only the client but also his emotions and the contrasting parts of his personality (id, ego, and superego). It is also noteworthy that through the defense mechanism of condensation he created figures to represent these aspects. The white man symbolized the superego (he scolds the blue man and tells him to do the right thing), and this superego was found not only within the client but also within the therapist. The blue man, with his anger microphone, as a representation of the id is a lone figure venting and acting in accordance only with its own desires. Yet as the project progressed he soon leaves the blue house (of fun), destroys the



1.16 *Open Arms*

anger microphone (and does not recreate it), and enters a house of safety (the white house) where he can discuss feelings. Finally, a snowman appears. Initially placed in the background (Figure 1.14), it takes center stage next to the white man and is given a heart. This figure, the antithesis of the others, has been given open arms with a less regressive trunk.

Figure 1.16 was the last art therapy project completed by the client. The defense mechanism of condensation, as well as this client's infantile regressive features, was rechanneled into a burning desire to plan for and discuss his future living arrangements in the community.

The release of this client's id drives, through the use of transitional objects in a structured environment, allowed the regressive process to run free without judgment. The abandonment depression, which he was able to experience and not just process intellectually, was successfully navigated through quiet listening and uninterrupted attention. In short, the client's fears were permitted liberation through symbolization, whereupon he was then able to find a satisfaction that was both ego supportive and stabilizing.

Regression

The last defense mechanism we will illustrate is regression. Regression is often equated with a fixation to earlier developmental points—specifically, infantile behavior patterns. The ego, to avoid anxiety or hostility, returns to a safe haven, a developmental point in the past, where it can rely

upon a dependent position for comfort. The satisfaction that the individual achieves can be all encompassing, as with psychosis, or partial.

Laughlin (1970) classifies regression as either “minor,” which he defines as transitory and tending to be secondary to the mental illness, or “major,” which he associates with psychotic reactions and which is a prominent influence in the individual’s life. It is these categories—minor regression and major regression—that we will illustrate through two different clients. Both are adult males who have a significant history of placement in both board and care homes and the forensic hospital setting. It is important to note that, especially with adult males, institutionalized regression is a common problem. The individual, removed from the community and often placed far from the familial support system, quickly adjusts to a dependent style of living. The cycle of release and return to prison, jail, or the hospital is all too familiar. In most situations these individuals have spent more time living with strangers than they have with family members or independently. They little understand the responsibilities of adulthood, and maturation has been fixated on a dependent level.

The confinement, therefore, is imposed both from without (rules, restrictions, and authority) and from within (fear of release, vulnerability to anxiety, and the ensuing ego regression). At this point I would like to refer to Figures 1.1 and 1.2. The neighbor in the project who placed bars on the once-orange home was an elderly, unmarried male. As previously outlined, the group was highly defensive in their response to my comments that the home now looked like a prison. Met with this resistance, I simply filed away the intellectualizations as the group continued work on the clay project. The following week this patient returned to his individual assignment (Figure 1.17) and finished earlier than the rest of the group.

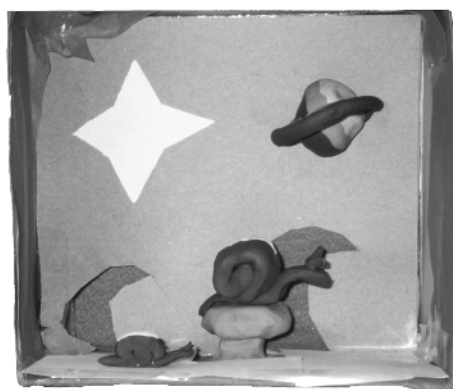
As we sat quietly waiting for the others, he spontaneously stated, “the snail only knows the box.” After inspecting his creation and recalling the bars he placed on the orange home I knew that his dependent position was purely unconscious. Wavering over whether to interpret or question, I decided to reply from a feeling affect; thus, I stated, “That must be extremely sad for him.” The conversation abruptly stopped, and the client immediately set to work undoing the thought (see Figure 1.18). He quickly fashioned a youthful snail (how can one be sad with others around?) and the planet Saturn (the second-largest planet in the solar system, whose presence certainly undoes the closeness of confinement), all without saying a word.

One could not erase the regression any more completely than this patient did by symbolically enlarging the box to encompass the sky, moon, planet, and the continued future generation of snails. Yet the symbolism

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1.17 *The Snail Only Knows the Box*



1.18 *Erasing the Regression*

reaches beyond that of regression and the defense mechanism of undoing: It encompasses the entire project. This patient had a multiplicity of choices, both in object and color, yet he chose the snail as his animal and a specific planet. These choices are not arbitrary; they arose from his unconscious in response to the directive (“create an animal” and “an environment for the animal to live [in]”) and ultimately represented a response to an interpretation that was too confrontive for his fragile sense of self (Figure 1.18). If we explore each element separately, we find the snail to be a slow-moving animal (or person) that also possesses a protective shell (for safety, security, and shelter). Next, the representation of Saturn has been encased in the same colors as the snail, even though a wide range of colors was available. This planet, beyond the fact of its size, also possesses a protective “shell” in the form of its icy ring. In addition, “Saturn symbolizes time which, with its ravenous appetite for life, devours all its creations, whether they are beings, things, ideas or sentiments. . . . Hence, Saturn is symbolic of activity, of slow, implacable dynamism, of realization and communication” (Cirlot, 1971, p. 278).

The regression that this patient exhibited, no matter how hard he tried to hide it, had devoured him. He was an institutionalized career criminal with a mental illness who had been taken care of his entire life. His regression was total; the realization, frightening.

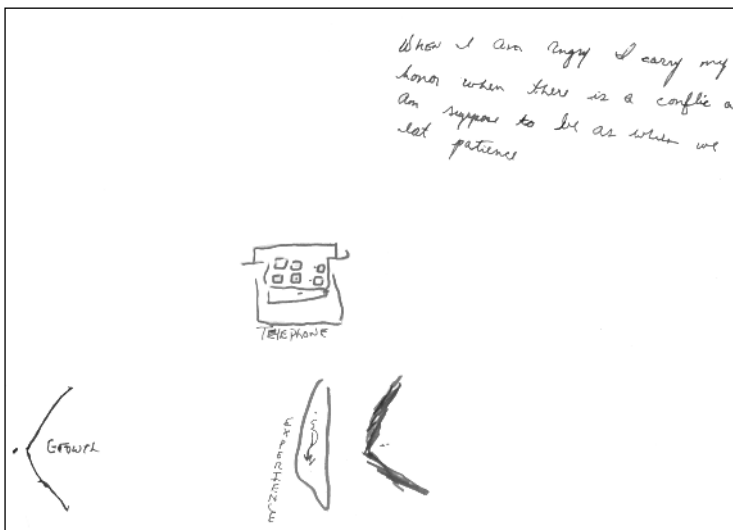
The second example, that of a major regression characteristic of the oral phase of development, was created by a young adult diagnosed with chronic schizophrenia. After prior releases into the community, he had been placed in board and care homes, but eventually he had run—only to live a transient lifestyle until he was re-arrested for a crime. At the time of these renderings he was again looking at placement in a board and care

home. As you will note, his drawings tend to have shapes within shapes and excessive scribbling, which is indicative of a 3-year-old's rendering. However, the primitive detailing, disproportion, and disorganization found within these drawings is also representative of schizophrenic artwork and bespeaks of the fragmentation of personality.

At the time of his placement the patient was not experiencing hallucinations and was taking the most recent antipsychotic medication. However, the following series of drawings shows a progressive embracing of regressive behavior. The anxiety that the impending discharge date produced in this patient had created a deterioration in functioning. Ultimately, he was progressively retreating into primitive forms of perception, and within a month his drawings had regressed to form, shape, and simplistic lines.

Figure 1.19 typifies this patient's difficulty with language and communication. As we look at the individual components in the drawing, there are shapes within shapes, as well as scribbling over lines, and the incongruent quality all bespeak of a regressive and "loose" style.

Additionally, his impaired communication skills are evident in the writing found on the upper right. It reads, "When I am angry I carry my honor when there is a conflic a am suppose to be as when we eat patience." He explained that "honor" stood for remaining calm and brushing off perceived disdain. The definition of "eat patience" was holding the anger within. The disorganized speech noted in his writing has a tangential



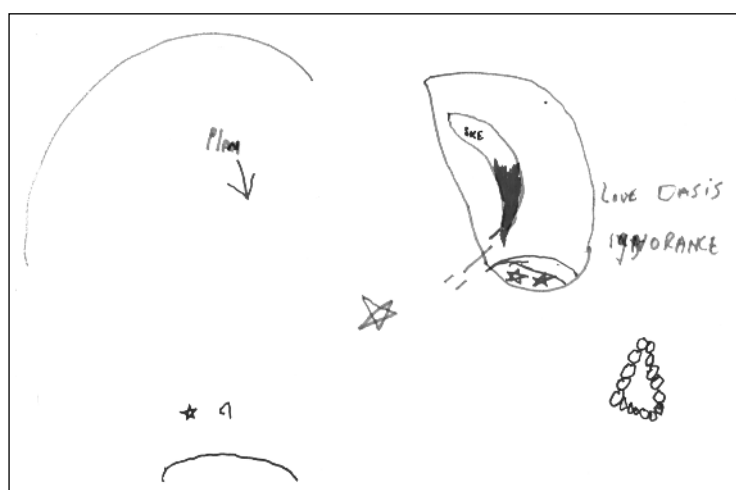
1.19 When I Am Angry

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quality when taken alone; however, in the context of his other drawings and explanations it pointed toward sexual issues related to abuse and inadequacies.

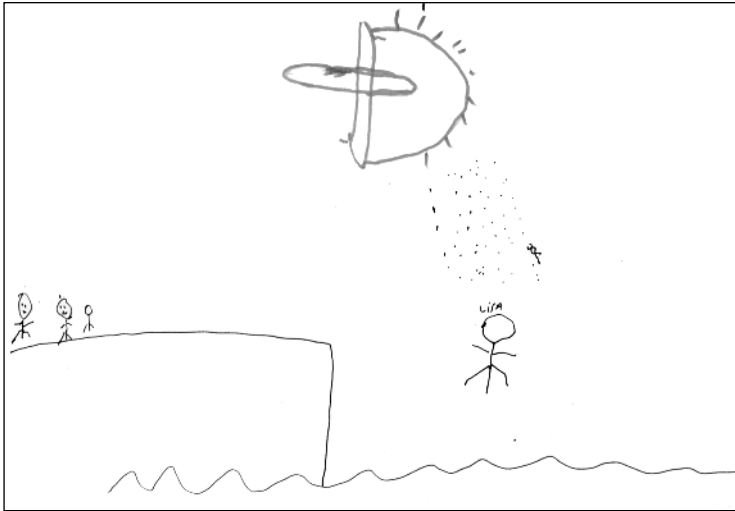
His next two renderings placed more pieces within the ensuing puzzle. In Figure 1.20 he drew his “experiences of hurt.” This rendering is completely symbolic and appears aggressively sexual in nature. He titled the image “Love oasis ignorance.” All marks with the exception of the linked circles are his experiences of hurt. The raindrop shape symbolized pain, while the word “ignorance” stood for lack of honor, which in turn stood for a lack of manhood. The linked circles were the love oasis. At the end of the session I asked the patient to place himself within the image; he is found as a small dot just inside the circled area.

By Figure 1.21 he was again utilizing shapes within shapes and continued to use sexualized symbols (note the sun). However, on this day he was also verbally fantasizing about how we would set up house and how I would take care of him. With each statement and drawing, it was clear he was regressing into a state of dependency. The disintegration, produced by anxiety, was finding outlet in the safety and comfort of the familiar and a familiar person to take care of his needs. Yet the schizophrenic patient, fearful of closeness, tends to distort feelings and thereby concretize his or her thoughts. As Arieti (1955) has said, “physical love is a concrete symbolization of what is really wanted: love and reassurance” (p. 477). As a final remark, in Figure 1.21 the patient is found on the far left with two



1.20 Love Oasis Ignorance

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1.21 *Sexualized Symbols*

friends. He is the image without a face. This author is located in the center of the form page. However, the rain was not in the initial drawing; the patient added this after I interpreted his desire to marry as a need for closeness. Once again, we see the defense of undoing come to light when prompted by a translation that is too close to the basic need or thought.

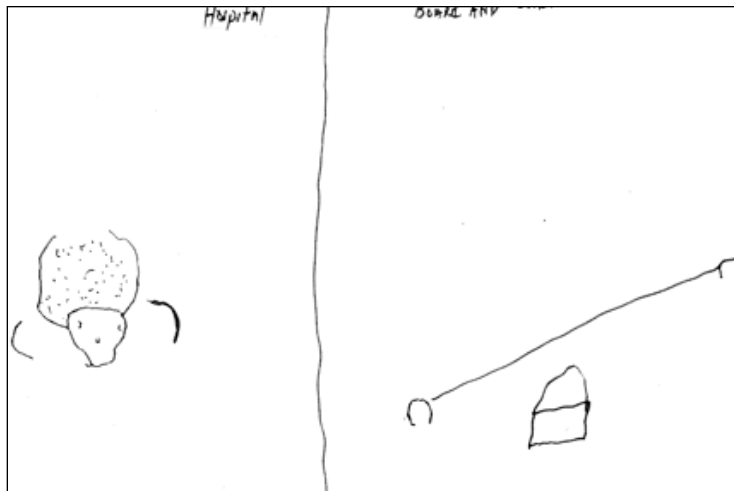
As the sessions progressed, they focused both verbally and pictorially on the board and care placement. This was the basis of his anxiety and needed to be processed so that he would not retreat into complete infantile behavior. One such polarity directive was “Draw how you feel in the hospital and how you think you will feel at the board and care home,” which is outlined in Figure 1.22. He stated that his drawing (viewer’s left) was the ward dayroom and the dots were the people milling about.

An example of the patient’s artwork prior to his disintegration is found in Figure 1.23, whose directive was “Draw the good things in your life on one side of the paper, and things you should stay away from on the other side.” This rendering is juxtaposed with an illustration of a later directive: “What do you imagine the board and care home will look like, and what will you be doing?” (Figure 1.24).

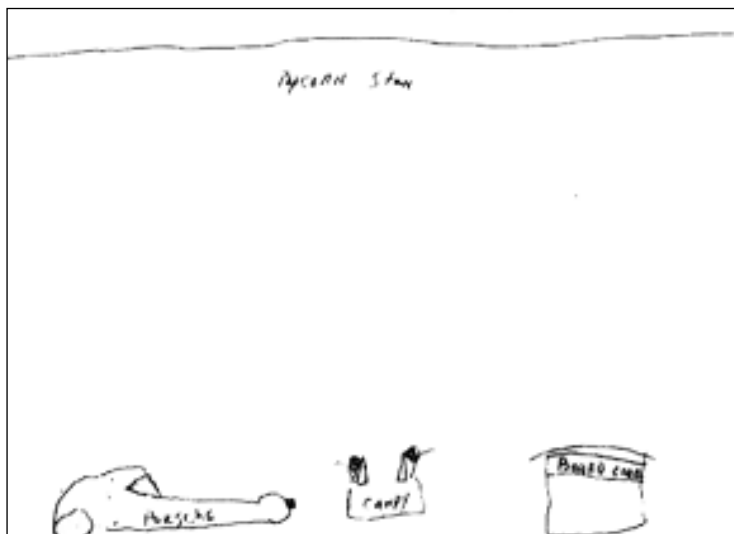
The car in Figure 1.23 is well formed, though phallic in nature, and is identified as a Porsche. However, the cars in Figure 1.24 (lower left side) are merely shapes and form, devoid of detail.

This patient’s major regression occurred in response to the overwhelm-

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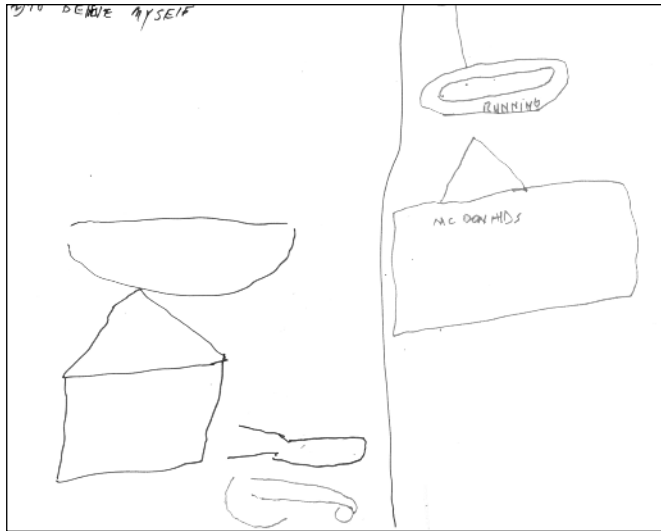
1.22 Board and Care



1.23 The Good Things in Life

ing anxiety produced by his impending board and care home placement. Furthermore, it was during the session in which Figure 1.24 was completed that the patient divulged that a resident at a board and care had sexually molested him, which precipitated his running away. In the end the patient remained in the hospital an additional three months to allow him an op-

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1.24 *Life at the Board and Care*

portunity to process his concerns with both clinicians and board and care home operators prior to reentry into the community.

Summary

Ultimately, identifying and understanding defense mechanisms are important skills that aid in the assessment of and intervention with a client's adaptive and maladaptive responses to the environment. The utility of art therapy was aptly described by Levick (1983) when she said that art therapy "also provides an opportunity to re-experience conflict and then to resolve and to integrate the resolution" (p. 9). The employment of art not only served to identify the defenses but also allowed a safe forum in which the disquiet, trauma, and fear could be expressed while providing ample boundaries so that the anxiety was not overwhelming. In other instances it served to underscore the unconscious conflict and allowed a partial ego regression, which ultimately proved beneficial. In time, what makes the art therapy experience so valuable is the ability to vent repressed material, experiences, and emotions through the process.

It is important to make a distinction between a coping mechanism and a defense mechanism. In the examples provided, the individuals employed a rigid, unconscious style of thinking to protect themselves from anxiety,

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whereas a coping mechanism implies a desire to meet the troubles and contend with them on a conscious or, at worst, a preconscious level. A maladaptive defense mechanism is never utilized deliberately or consciously, while a coping mechanism can be called upon to master the problem rather than masking it.

We are now ready to examine adaptive adjustment through a discussion of how behavior develops in typical and predictable sequences and how these stages apply both to art therapy and to defense mechanisms. Finally, I will offer practical suggestions to enhance treatment.