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ABSTRACT

This paper explores both projective and spontaneous drawings of school children and compares them to drawings of multiple personality disorder (MPD) patients. Results of many scholarly studies indicate that children typically follow predictable stages in their artistic growth with one stage or set of drawing behaviors building upon the preceding stages. It will be shown that MPD patients function artistically at different stages of creative growth, thus precluding artistic growth to flow smoothly, gradually, and predictably as it does in non-MPD individuals. The discontinuity in representative stages in the artwork of MPD patients will be addressed.

In psychology art has been viewed as a picture of or manifestation of an individual's personality, mood, temperament, fears, desires, state of equilibrium, or state of disequilibrium. While this approach has opened new avenues for research in understanding both art and human personality, other important factors need to be considered.

Goodenough (1926) successfully demonstrated that a large intellectual component existed in children's drawings. Her standardized and validated Draw-A-Man test has become widely accepted and is used in schools for assessing intellectual maturity. From this test not only has a scale for assessing intellectual maturity been developed, but many have applied that scale to the study of children's personalities, affective life, conflicts, and interests.

This shift in focus from the intellectual to the emotional properties of artwork has taken place with little regard for normative developmental trends in artistic, creative growth. Some 35 years after the Draw-A-Man test became accepted as an instrument designed to measure intellectual maturity Harris (1963) attempted to revise and extend Goodenough's work. Notable was the Harris finding that the Draw-A-Man test measures mental maturity (intellect), but not personality traits, fears, equilibrium, or disequilibrium. Also notable is the concern for interpreting the content of artwork as a developmental or projective measure. A preoccupation with this symbolic interpretation has resulted in conflicting reports over the meaning of particular signs and symbols with little concern for the continuity or discontinuity between projective and spontaneous artwork, or for the age of the artist.

It will be shown that there are general characteristics in the form of artwork that can be predicted and are consistent with regard for stated ages. These characteristics represent different stages of creative, artistic growth, and, in fact, these characteristics in the form of artwork can give important clues that identify the age of the artist. The parallel between stated age and representative stage of artistic, creative growth represents a continuous, gradual maturational process as one stage builds upon the preceding stage.

These concerns, particularly the identification of stages that are consistent with stated ages, raise intriguing concerns when applied to the artwork of multiple personality disorder (MPD) patients. Emerging evidence suggests that separate personalities, represented as having differing ages, function artistically at different stages of creative growth, thus precluding artistic growth to flow smoothly, gradually, and predictably as it does in non-MPD individuals. The intent of the current communication is not to show a simplistic one to one correlation between the artwork of an eight year old child and an alter of an MPD patient who perceives himself as eight years old. Instead, it explores the discontinuity in the form of artwork between alters, and is intended to demonstrate that this phenomenon warrants further scientific attention.

PREVIOUS RESEARCH ON DEVELOPMENTAL ASPECTS OF CREATIVE EXPRESSION

Previous studies (Cooke, 1885; Lowenfeld, 1947; Kellogg, 1955; Koppitz, 1968; Gardner, 1980) have indicated that children typically follow predictable stages in their artistic growth, with one stage or set of drawing behaviors building upon the accomplishments of the preceding stages. This research has shown conclusively that children's drawings change gradually and continuously as children mature. Lansing (1974) summarizes: "the changes accumulate, and at times the resulting drawings appear to be significantly different than earlier drawings. We speak of stages because it is a convenient way of indicating that a major change has occurred" (p. 136). These changes occur in form, represented by changing spacial organization, line qualities, and use of detail.

Fuhrman (1988) studied the form of artwork of 517 school children ranging in ages from 5 through 12 for purposes of documenting developmental stages found in the artwork of children. While previous research (Lowen-
feld, 1947) recognizes six stages of creative, artistic growth, only four stages were relevant to the current study. Both projective test drawings and spontaneous drawings were examined in four areas. The drawings were observed for recognition or identification of the visual symbol (i.e. not a scribble), presence of a baseline, use of representational color, and assessment of symbol enrichment. Each of these four areas represents prominent characteristics of artwork in one the four stages of creative growth that are represented in children whose chronological age is between 5 and 12 years. These stages have been documented in earlier studies (Burt, 1921; Lowenfeld, 1947; Kellogg, 1955; Gardner, 1980) and were replicated in this study. A summary of the important characteristics of each stage of artistic growth is shown in Table 1. It should be noted that because visual, graphic, artistic development is gradual, smooth, and continuous, researchers sometimes disagree over the number of stages of creative growth. All agree, however, that, regardless of the number of stages, artistic, creative development does follow a reasonably predictable course in normal populations.

These developmental stages were apparent in the artwork of the 517 students that were studied. It became clear that there are general, identifiable stages that can be predicted and examined. Close examination revealed characteristics in the form of the artwork that emerge at particular ages that can be both predicted and examined for age appropriateness. It can be stated that creative, artistic growth flows smoothly, gradually, and continuously with one stage building upon the preceding stage. Results indicate that each stage represents specific tasks that must be mastered before the child moves on or matures to the next stage.

This study was done for the purpose of observing and documenting the normative patterns that emerge in children’s artwork as they mature from stage one through stage five or six so that appropriate expectations are set in the teaching of children. It became clear that preschool age children’s concepts differ from those of children in higher grade levels as do preadolescent children’s concepts differ from adult’s concepts.

Results of this study are not meant to suggest that regression does not occur nor that creative growth always moves in one direction. However, in this study regression to

<table>
<thead>
<tr>
<th>Stage 1</th>
<th>Ages 1-2 years</th>
<th>Gestural rather than pictorial scribbles • Verbal clues give meaning</th>
</tr>
</thead>
<tbody>
<tr>
<td>Stage 2</td>
<td>Ages 3-4 years</td>
<td>• Geometric shapes appear, • Circles, crosses, rectangles, • Triangles, squares</td>
</tr>
<tr>
<td>Stage 3</td>
<td>Ages 5-6 years</td>
<td>Geometric shapes combined into meaningful referential units • No baseline • No obvious relationship between picture parts</td>
</tr>
<tr>
<td>Stage 4</td>
<td>Ages 7-9 years</td>
<td>Definite top and bottom to picture Greater detail in familiar forms • Relationship between parts of the picture • Indication of movement or motion • Differentiation between real and imaginative images • Beginnings of realistic size relationships</td>
</tr>
<tr>
<td>Stage 5</td>
<td>Ages 10-12 years</td>
<td>• Attempts at perspective • Pronounced differences between the sexes • Elaborate scenes, detail • Words included</td>
</tr>
<tr>
<td>Stage 6</td>
<td>Ages 13+</td>
<td>• Colors, lines, texture and shading used expressively • Art used as a projection of concepts and emotions • Stage of “artistic decision”</td>
</tr>
</tbody>
</table>
scribbles was apparent in only two of the more than 1500 drawings of the 312 children above the age of 6. Available data does not allow any conclusion to be drawn on those two drawings. This data does, however, reveal a pattern of continuous, gradual development through the stages as children mature.

**APPLYING DEVELOPMENTAL RESEARCH ON ART TO MULTIPLE PERSONALITY DISORDER (MPD)**

Drawing upon the conclusions of this research into children's changing artistic behaviors, one can apply this knowledge of the stages of artistic growth to multiple personality disorder patients who have alters who experience themselves as different ages (older and/or younger) and who often choose different avenues of creative expression (Kluft, 1984).

The stages of creative, artistic growth are the same in all individuals, whether MPD or not. While most multiple personality disorder patients are identified during adult years according to chronological age, when developmental trends in artistic growth are considered their drawing behaviors across personalities may differ dramatically from those of non-MPD individuals. The characteristic distinguishing features of the artwork of MPD patients lies in the fluctuation in representative developmental stage; i.e., both adult and child drawing concepts are present. This discontinuity in stages is noteworthy, and has not been reported in the artwork of non-MPD adults.

**STUDY I: MPD PATIENT ARTWORK REFLECTING SEVERAL DEVELOPMENTAL STAGES**

In order to apply the findings noted above to the drawing productions of MPD patients, the work of eight patients with DSM-III-R (American Psychiatric Association, 1987) MPD were studied. Due to the preliminary nature of this aspect of the study, the findings do not lend themselves to quantitative expression and will be summarized.

While the stages of creative growth can be predicted in the artwork of children within school populations, the same predictability does not emerge in the artwork of multiple personality disorder (MPD) patients. When chronological age is considered, one would expect that the artwork of adult patients would reflect consistency in form showing only stage five or six characteristics. Rather, it will be shown that...
there is a marked difference in representative stage with characteristics of child art as well as characteristics of adult art existing in the work of a single, individual MPD patient.

Nearly all MPD patients presented artwork that ranged from stage one scribbling to stage six artwork, which typically exemplifies the commitment to art beyond what is usual in persons over the age of thirteen. In all the work shown here, the age of the alter was determined by the form represented by line quality, spatial organization, and the addition of detail as reflected in the usual creative growth mentioned in the previous study of school children.

**EXAMPLES**

*Patient one:* The four drawings shown here represent the work of a patient who has been in treatment for MPD for six years. The work shown in (a), (b), and (c) were completed within the last twelve months and represent developmental ages of (a) 4, (b) 5-6, (c) 8. The last work (d) was completed three years ago and represents a developmental age of 13+. It is unlikely that the alters in (a) or (b) could trace the letters with the skill shown here, nor would an eight year old choose words as a title and incorporate it in the work as seen in (d). This patient has produced well over two hundred works and is over age thirty.

*Patient two:* These two works reflect similar themes but again, with different skill development or ability to control the drawing instrument. Drawing (e) represents a developmental age of 6 while (f) is a more sophisticated design most probably produced by a teenage alter. This patient has been identified as MPD less than one year and all thirty-one pieces of artwork have been done within the last six months.

*Patient three:* These two drawings (g) and (h) were dated 1968 when the patient was a teenager. Patient report included a statement that the two works were completed on the same day within a few hours of each other. The difference in skill and style in the two drawings led to such turmoil within the patient that all spontaneous drawing stopped and resumed only when new alters were created a year later to attend a drawing school. The alters were identified as ages seven and eighteen. They resumed their drawing when found in therapy for MPD in 1984. Their skill and style differences were still apparent (i) (j), as was the turmoil as a woman in her early thirties realized that at times she most certainly drew like a child in spite of her considerable artistic achievements.
While many stages of growth can be identified in the artwork of MPD patients, no one stage is consistent over time. All artwork shown here was done by patients of age seventeen or older, suggesting that normative, gradual, smooth and continuous artistic growth did not occur. Rather, the fluctuation between stages became apparent in artwork done within hours and days of each other. This fluctuation in stages documents what appears to be spontaneous age regression from adult patient to child alter to teenage alter, etc.

Noting the differences of form found in the artwork of these individual MPD patients, one might conclude that the dramatic shift in representative stage, or spontaneous age regression, is a characteristic found in MPD artwork that differs from the general population. The significance of this finding is considered by this author to be important in a therapy situation where healing often depends heavily upon identification of child alters who may have knowledge of, or access to, behavior, affect, sensation, and knowledge that Braun (1988) has suggested are the components of memory.

Creative growth does follow the same progression in MPD patients as in other normal or patient groups. However, it does not flow gradually, smoothly, and continuously with one stage building upon the preceding stage. Rather, each stage appears to exist independently, as do memories (Young, 1988), causing a failure of the MPD patient to integrate knowledge and experience. Lack of integration results in a fluctuation between stages as different personalities assume control of the body and create visual works that reflect their individual styles and stage of development (Fuhrman, 1987). It can be said that the age regression as personalities switch in MPD patients is reflected in the form of the artwork.

AGE REGRESSION IN ARTWORK

It has been suggested that age regression in adult patients does not lend itself to a biological recovery of sensory perceptions but rather does make the subject less concerned about the accuracy of his memory; therefore the age regressed adult relates or behaves as he believes a person would behave at a particular age (Orne, 1974). This would suggest that the artwork of MPD patients does not reflect true developmental stages but would actually indicate that the patients are drawing as they believe children would draw. While this may be true of hypnotically age regressed adults the materials available to me appear to indicate that this differs from the spontaneous age regression in adult multiple personality patients in much the same way as projective drawings differ from spontaneous drawings in matters relating to “the process of response to a given command” (Ainsworth, 1951). That is, the instructions to age regress or to follow a test protocol bring with them different demands from those that pertain to a spontaneous drawing session, and perhaps even to a spontaneous age regression.

STUDY II: RESULTS OF A SURVEY

In order to further study creative processes in MPD patients, a questionnaire was distributed at the Philadelphia Study Group on Multiple Personality Disorder. The data reported in Table 2 was collected from the therapists of eight females between the ages of 23 and 55. All eight patients met the DSM-III-R criteria for Multiple Personality Disorder (1987) and were at different stages of treatment ranging from ten months to eight years after the MPD diagnosis was made.
This chart shows that adult MPD patients, regardless of formal training, have used creative means of expression well beyond what is usual in adult populations. Beyond the finding that MPD patients appear to be highly creative individuals, as noted in the Schultz, Braun, and Klufi study in 1985, this study documents use of creative processes, reported by the patients, that can aid in resolution of trauma by erosion of defenses that maintain the dissociative disorder. As reported by these eight patients and their therapists, artwork can serve in the healing as:

1. personalities are identified either by style, media, or by the production of self-portraits;
2. traumatic information is uncovered via presentation of a pictorial view or reports of destruction of these; and/or
3. communication between alters is promoted through artistic expression.

Perhaps, careful observation of artwork given the therapist by the patient will enable healing to occur at a more rapid rate as visual communication serves the healing before verbal communication is available.

In his 1986 Treatment of MPD, Braun identifies thirteen issues regarded as basic considerations in the psychotherapy of MPD. Four of these considerations (gathering histories, communicating with each personality state, undertaking of special procedures such as mapping, and resolution of trauma) have been shown to occur through or be facilitated by the use of creative processes.

Additionally, Spiegel (1986) discusses intervention strategies that can be addressed through the use of visual imagery. By confronting the trauma, condensing the traumatic experience to make it more manageable, by acknowledging moments of terror and revenge often depicted in artwork, and by making conscious previously repressed or dissociated material, the patient can move towards integration and final resolution. As these intervention strategies and issues are aided through patient use of creative processes, and, as developmental stages reflected in the artwork are accounted for, no longer will there be a need to preserve information in the separate personality states. The patient can move forward in healing towards a more continuous, uni-directional, integrated self, fully capable of communicating both verbally and artistically.

CONCLUSIONS

While the result of many scholarly studies indicate that children typically follow predictable stages in their artistic growth as they mature, the same predictability does not emerge in the artwork of multiple personality disorder patients. The artwork of MPD patients has been shown to reflect characteristics found in all six stages of creative, artistic growth from stage one scribbles to stage six representations without regard for the phenomenon of one stage building upon the preceding stage. Rather, it appears that each stage exists relatively independently in the MPD patient, resulting in a fluctuation between stages as different personalities assume control of the body and create visual works that reflect their individual styles and stage of development.

**TABLE 2**
MPD Patient Use of Artwork

<table>
<thead>
<tr>
<th>Patients n = 8</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
</tr>
</thead>
<tbody>
<tr>
<td>Has your patient used artwork to identify alters?</td>
<td>-</td>
<td>+</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Has your patient used artwork to promote communication between alters?</td>
<td>+</td>
<td>+</td>
<td>-</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Has your patient used artwork to identify traumatic information?</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Has your patient demonstrated several styles of expression?</td>
<td>Realism, abstraction, etc.</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Can alters be identified by style?</td>
<td>+</td>
<td>+</td>
<td>?</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>-</td>
</tr>
<tr>
<td>Can alters be identified by media?</td>
<td>+</td>
<td>-</td>
<td>?</td>
<td>?</td>
<td>?</td>
<td>+</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Has artwork ever been destroyed by alters who wished to protect or hide traumatic information?</td>
<td>+</td>
<td>+</td>
<td>?</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Does your patient use writing as a means of expression either in the form of poetry or music or any other written means?</td>
<td>-</td>
<td>-</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>+</td>
</tr>
<tr>
<td>Does your patient use photography as a means of self-expression?</td>
<td>+</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Does your patient participate in any dance or movement classes?</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>+</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Has your patient ever received special recognition for artwork?</td>
<td>-</td>
<td>-</td>
<td>+</td>
<td>-</td>
<td>-</td>
<td>+</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Has your patient been trained in the arts either working towards a B.A., B.F.A., M.F.A., or B.S. in Art Education?</td>
<td>-</td>
<td>-</td>
<td>+</td>
<td>+</td>
<td>+</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Has your patient ever taught art formally or privately?</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>+</td>
<td>+</td>
<td>-</td>
<td>-</td>
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</tbody>
</table>
These findings, although resulting from a rather small sample, suggest that there is a spontaneous age regression or a phenomenon akin to it, that becomes apparent in the artwork of multiple personality disorder patients that may represent something quite different than is expected when the Orne (1974) hypothesis is considered. Previous studies on age regression suggest that adults would not show different developmental stages in their drawings. However, counterexpectationally, MPD patients do show different developmental stages regardless of their adult, chronological age.

While the intent is not to show a correlation between the drawings of an eight year old child and an alter of an MPD patient who perceives himself as eight years old, findings of this study suggest that the fluctuation between developmental stages must be accounted for since this phenomenon is not known to occur in non-MPD patients. Quite possibly, in normal adult populations, one draws like an adult (or does not draw at all) because he experiences himself as an adult just as others see and/or expect to see him as an adult. Perhaps the adult MPD patient does not spontaneously age regress but experiences a subjective alteration of age, or quite possibly the phenomenon of child alters is fundamentally different from hypnotic age regression in non-MPD cohorts and is more difficult to compare than would initially appear.

Perhaps the difference between what appears to be spontaneous age regression in the MPD patient and the hypnotically age regressed individual is much like the difference in projective and spontaneous drawing. If the hypnotically age regressed individual's response results from suggestibility and motivation and direct and/or implicit instructions which are part of the hypnotic experience (Orne, 1959) perhaps suggestibility and motivation are part of the response in a projective drawing situation.

While the results of a study which attempts to understand the differences in the drawings of hypnotically age regressed adults and MPD patients are forthcoming, one of the major implications of these studies is that our attention should be focused on what the patient says about his artwork. Results of a survey into patient use of creative processes have shown that artwork can aid in finding alters, opening communication between them, and, in general paving the way for healing.

REFERENCES


