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Road Drawings With Adults in a 23-Hour Crisis Observation and Stabilization Unit

Michael J. Hanes (1)

Abstract

In this article, the author discusses the benefits of using road drawings with clients presenting at a 23-h crisis observation and stabilization unit. The rationale and procedure for administering road drawings is explained with a case example to illustrate how road drawings can be employed to de-escalate the severity of a crisis. Its narrative quality enabled clients to tell their story and make sense of life experiences and events. Furthermore, it enabled clients to see more opportunities ahead of them, provide ideas for new actions, as well as motivate and instill hope, ultimately helping to shape their behaviors and choices. Lastly, its projective properties provided access to significant mental and emotional aspects that made it beneficial as an informal assessment.

Keywords: Road drawing; art therapy; adult; 23-hour crisis stabilization; assessment

Research shows that mental illnesses are common in the United States. In fact, one in five adults (52.9 million) were living with a mental health disorder in 2020 (Peters et al., 2023). Subsequently, there has been a mounting number of people seeking care for behavioral health in emergency department (ED) rooms. Many of these individuals are retained in the ED for long hours, typically awaiting transfer to an inpatient bed or crisis center; however, research shows most of these clients could be discharged in less than 24 hours if they receive prompt evaluation and treatment (Substance Abuse & Mental Health Services Administration [SAMHSA], 2014). Thus, the emergence of the 23-hour crisis observation and stabilization unit. The specialized unit permits individuals in severe distress the opportunity to voluntarily receive up to 23 hours of consecutive supervised care to assist with de-escalating the severity of their crisis and/or need for urgent care provided in an inpatient psychiatric setting. The units are staffed

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with a multidisciplinary team capable of meeting the needs of individuals experiencing all levels of crisis (SAMHSA, 2014).

In recent years, there has been a growing body of literature illustrating the benefits of using art therapy to address the needs of individuals in crisis (Noble & Hackett, 2023; Scarce, 2021; Wright & Andrew, 2017). Indeed, the American Art Therapy Association asserted art therapy is particularly effective during periods of crisis (AATA, 2020). Yet, I believe literature has focused little on the use of art therapy with clients presenting in crisis at short-term psychiatric settings. This paper discusses the use of road drawings in a 23-hour crisis observation and stabilization unit.

The Road as a Preferred Drawing Theme

There are undeniably many advantages to using the road motif with individuals presenting at a 23-hour crisis observation and stabilization unit. For instance, individuals with mental health problems often struggle with lower self-esteem which can manifest in intense insecurities about their artistic abilities (Buchalter, 2015). Because the road can be simpler to draw than other topics, the task is less likely to awaken feelings of insecurity. Even those that are apprehensive about their drawing abilities are likely to respond to the request to depict a road (Hanes, 1995).

Another advantage of the road motif is its universal significance and ability to generate an abundance of associations in comparison to other subject material (Hanes, 1995). Additionally, clients tend to view roads as a neutral theme and are more likely to be spontaneous and unbound by conventional censors that encumber the emergence of unconscious content (Hanes, 1995, 2008). Moreover, its projective properties can provide immediate access to significant mental and emotional aspects that make it beneficial as an informal assessment (Hanes, 2017).

My final argument for the road motif is its narrative potential and its association with a person's life story (Hanes, 1995). Storytelling and their narratives are a way of understanding the world, as well as events. Humans often recount stories to provide a sense of continuity, meaning, and the opportunity to create an

alternative ending (Metcalf, 2017). Similarly, clients can use the road's narrative potential to tell their story and make sense of their life experiences and events. Furthermore, a problem saturated road can be altered to help clients see more opportunities ahead of them, provide ideas for new actions, as well as motivate and instill hope, ultimately helping to shape their behaviors and choices (Hanes, 2017, 2020).

Materials and Method

Over the last 25 years, the road drawing directive has emerged in the United States (U.S.) as one of the most widely recognized informal art-based assessments administered by art therapists (Betts, 2016; Schmanke, 2017). Initially introduced as an emotive theme in art therapy, the original purpose of the road drawing directive was to serve as a therapeutic metaphor that had the potential to "elicit spontaneous imagery that represented the client's origins, history of his or her life, experience to date, and intent for the future" (Hanes, 1995, p. 19). Additionally, the periodic reparation or upgrade of the road could serve as a metaphor for the client's capacity for change and recovery (Hanes, 1995).

I find that 12" × 18" paper provides a secure and stable space that best lends itself to the narrative potential of a road drawing. Extra paper is made available should the client wish to restart the task. A tabletop was not always practical; therefore, I had clients draw on a sheet of sturdy cardboard. Potential safety concerns limited drawing materials to a box of 8 soft tipped colored markers and a pack of 16 colored crayons. The preceding materials are less likely to be used as potential weapons or instruments of self-harm. Moreover, resistive materials are more desirable when working with individuals in crisis because of their ability to generate feelings of control and the capability to self-regulate (Hinz, 2020).

The instructions for the road drawing are simple, "I would like you to draw a road" (Hanes, 1995). After a slight pause, the following suggestions are offered to reduce artistic insecurities and stereotypic responses:

Is the road made from dirt, gravel, stone, brick, cement, or blacktop? Where does the road begin and end? What is the condition of your road or roads? Is this a straight road, curvy road, hilly road, or flat road? Is there more than one road? Are there any intersections? Is there anything alongside your road or in road? Are there any signs or markers along your road? (Hanes, 2020, p. 4)

Should the preceding instructions elicit questions, I assure the client there is no right or wrong method of proceeding. Once the drawing task is completed, I encourage clients to use the backside of their paper to title the picture and write a brief narrative about their drawing.

Setting

The setting was a 23-hour crisis observation and stabilization unit situated in a Community Counseling Behavior Heath Center (CCBHC) located in a poverty-stricken section of a large metropolitan city in mid-west U.S. Clients were 18 years and older, often severely mentally ill with co-morbid conditions that included, but were not limited to, substance use, trauma, homelessness, unemployment, and chronic medical conditions. The primary goals of the specialized unit included restoration of safety, stabilization of symptomology, and care coordination of services outside of the unit. Art therapy was voluntary and offered individually as a single session intervention. Clients provided consent for their imagery to be photographed for presentation and publication.

Example

The following case example has been chosen to demonstrate the benefits of employing road drawings within a 23-Hour Crisis Observation and Stabilization Unit. I approached the art therapy task from a trauma informed psychoanalytic perspective. To achieve this, I combined the core principles of psychodynamic therapy, such as transference, sublimation, and the exploration of unconscious processes, with an emphasis on understanding and addressing the effects of trauma on the client's current functioning, prioritizing safety and a supportive therapeutic environment (Alessi & Kahn, 2019). The preceding framework requires significant training in art and psychodynamic theory and is beyond the scope of this paper but would be part of a rigorous master's or doctoral degree in art therapy.

Waylen

Waylen (pseudonym) was a 21-year-old Caucasian male. He presented at the specialized unit unkempt, underweight, and sickly. At the time of his admission, he was experiencing mild substance withdrawal and reported anxiety, depression, and suicidal thoughts. He had been using methamphetamine, Xanax and Cannabis for the past 3 years. Waylen recently spent 2 days in an inpatient psychiatric hospital and was then transferred to a sober living house. Soon after, he was evicted due to relapsing on methamphetamine and his refusal to comply with program rules. Waylen stated, "I went back hard on the needle ... I was fucking up big time ... I was making bad decisions." After living on the streets for nearly a week, Waylen's mother learned of his situation and persuaded him to come to the 23-hour crisis observation and stabilization unit.

Instructed to draw a road, Waylen approached the task without hesitation (Figure 1). The paper was oriented in a horizontal fashion, yet his road was drawn vertically reading from south to north. Due to mild

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Figure 1. Pick the Right Path: Four-Way Intersection With a Stop Light and Stop Sign

hand tremors, he employed the side of a crayon box to draw the initial outline of his intersection. Waylen remarked, "I need some help to get this straight." His drawing portrayed only a small section of road implying to the author his path was not narrative, rather a snapshot of the present moment and his current life circumstances (Hanes, 2020).

Central to his drawing was a crossroads which suggested Waylen was at a crucial juncture in his life, confronted with important choices or decisions with far reaching consequences (Hanes, 2017, 2020). This was further supported by the title of his picture, "Pick the Right Path." The four-way intersection emphasized a meeting place or a period of contemplation where Waylen's thoughts and ideas could merge before becoming either a decision or a creation (Cooper, 1978; Hanes, 2020). Waylen asserted, "The road I'm on is not good ... But I don't know which way to go ... There are so many directions." Waylen's roads were unfinished and led to nowhere perhaps illustrating his uncertainty, as well as a possible defense against making a

commitment (Hanes & Rojas, 2022). He drew arrows pointing down both his divergent paths and disclosed that he needed to make better choices but was uncertain which path to take. He placed both a stop sign and a traffic light at the intersection possibly emphasizing his struggles with impulse control and ability to self-regulate (Hanes, 2017, 2020). Waylen asserted, "I don't know if I should stop or go." I speculated that Waylen was alluding to his ambivalence toward treatment. Lastly, he drew a "convenient store" in the lower right quadrate. Waylen associated the structure with his current setting and recognized how the specialized unit provided shelter and various commodities.

I asked Waylen to imagine what might lie at the end of his unfinished roads. After much deliberation, Waylen asserted the northbound path led to continued drug use. "I can't keep going down the same path," observed Waylen. He visualized his eastbound road leading to his mother's house where Waylen stated he felt safe and loved. Lastly, he pictured his westbound route guiding him to treatment. He stated, "I need to get back in treatment, but I fucked up ... I

don't know what I should do." We discussed the benefits and drawbacks of reengaging treatment which ultimately empowered Waylen to commit to a path of rehabilitation. His suicidal thoughts gradually diminished, and he voiced a renewed since of hope, at which point Waylen was transferred to a residential substance use treatment center.

Waylen's road drawing was ultimately useful in helping him to recognize that he was at a crossroads in his life, confronted with critical choices and decisions with far reaching consequences. Furthermore, his drawing enabled him to understand how his uncertainty and indecision hindered his ability to make a commitment. After exploring the possibilities of Waylen's unfinished paths, he was able to see more opportunities ahead of him, as well as become motivated and have hope for his future, ultimately helping him to choose a path of recovery.

Implications

As illustrated in the case example, road drawings are a useful therapeutic intervention for individuals presenting at a 23-hour crisis observation and stabilization unit. Clients readily responded to the request to draw a road. The task is easy to administer and can be completed in a relatively short period of time. Furthermore, the task may be carried out with materials that present minimal safety risks. The road's narrative quality enables clients to tell their story and make sense of life experiences and events. After processing their road drawings, clients were able to picture more opportunities ahead of them, develop ideas for new actions, become motivated and have hope for their future, ultimately influencing their behaviors and choices (Hanes, 2020). Lastly, even though the drawing task is not a standardized art therapy assessment, its projective properties brought forth important information clients may otherwise have been reluctant to acknowledge (Hanes, 2017).

Conclusions

It is my hope this paper will inspire other art therapists to employ road drawings as a means of de-escalating the severity of a crisis. The narrative and storytelling potential of road drawings coupled with a trauma informed psychoanalytical approach to art therapy offers an effective model within which to address the treatment needs of clients presenting in crisis at short-term psychiatric settings. Lastly, its projective properties provide immediate access to significant mental and emotional aspects that make it beneficial as an informal assessment.

Disclosure Statement

No potential conflict of interest was reported by the author(s).

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