

# UTILIZING ROAD DRAWINGS AS A THERAPEUTIC METAPHOR IN ART THERAPY

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Roads have been universally significant since their development some 5,000 years ago. Their mythic and metaphoric meaning has permeated the language, art, poetry, and music of virtually all cultures. In this paper, I assert that road drawings can be a therapeutic metaphor in art therapy. I explain a procedure for administering road drawings and present examples produced by patients who participated in art therapy while in an acute inpatient psychiatric hospital. These examples illustrate how road drawings can be used to elicit spontaneous imagery that represents the client's origins, the history of his or her life, experiences to date, and intent for the future—even from just a single drawing. The periodic reparation or upgrade of the road serves as a metaphor for the client's capacity for change.

## Introduction

Roads have been relevant in the development of virtually all civilizations. A road is defined as a path worn by the repetitious travel of people and animals that must undergo periodic repair and upgrading. Roads originated around 3000 B.C. in the time of the Egyptian King Cheops. In this same period, roads also were being built by the Sumerians of Mesopotamia in what is now Iraq (Munro & Wilson, 1962).

The road is familiar and simple to draw, even for people who are anxious about artmaking. Clients tend to view roads as a neutral theme and are more likely to be spontaneous and unencumbered by the stereotypic or conventional censors that inhibit the emergence of unconscious content. My clinical experi-

ence has shown that road drawings can reflect unconscious processes residing in the primitive level of the client's personality. Road drawings have the potential to reflect the client's origins, the history of his or her life process, and intent for the future—even in just a single drawing. This theme provides an opportunity for clients to literally draw their "road of life." Additionally, the periodic upgrade of the road lends itself to the therapeutic process: Potholes can be repaired, alternate paths built, and warning signs erected to prepare for future events that may occur.

## Method

My instructions to clients are simple: "I would like you to draw a road." After a slight pause I may then offer suggestions such as: "Think of all the different types of roads . . . fast roads . . . slow roads . . . curved roads . . . straight roads . . . What type of material is your road made of? . . . In what condition is your road? . . . How many lanes? . . . Is there more than one road? . . . Are there any intersections? . . . What is along side your road or around your road? . . . Are there any road signs? . . . Where does your road go?" If these suggestions give rise to questions, I assure clients that there is no right or wrong method of proceeding and that the task may be completed in any manner they wish.

In selecting media, I consider the characteristics of various art materials and determine how these properties will affect my clients' response to both the art process and theme. I have discovered that 12" x 18" paper is the size most condu-

cive to road drawings. A larger paper can be experienced as overwhelming to clients who feel compelled to fill the entire space, while a smaller paper may be seen as incapable of containing some clients' images.

As most clients have had little experience with the art process, I offered materials that did not require extensive technical skill: a variety of dry media, including, but not limited to, crayons, Cray-pas, colored pencils, and chalks. These materials allow for greater detail and shading, as well as variance in color intensity—qualities that may yield significant information and draw attention to areas of conflict or importance (Furth, 1988).

## Case Examples

I obtained the following examples from patients participating in group art therapy at an acute inpatient psychiatric hospital. All patients were encouraged to participate. I chose road drawings as a theme based on my assessment of the clients' therapeutic needs. Liebmann (1986) states:

There is no 'right' way of choosing a theme. It is a matter for each leader or therapist to work out in the most appropriate way, according to their own preferred style, the needs of the group and the facilities at their disposal. (p. 28)

The client's images are ideographic and, therefore, idiosyncratic meaning must not be overlooked.

### Path of Drug Addiction

Michael, 43, was involuntarily admitted to the hospital for treatment of Polysubstance Dependence. The client was frail, his body depleted from years of drug abuse. He had an extensive history of drug treatment for heroin addiction, which to date had achieved little success. Shortly after completing a drug treatment program, Michael immediately returned to

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Figure 1

his habitual pattern of drug abuse. He admitted to ambivalence about discontinuing his drug abuse, "I'm not harming anybody," consequently disowning his addictive and self-destructive behavior.

Asked to draw a road, Michael readily engaged in artmaking, hastily completing Figure 1. His use of a horizontal format suggests that his road drawing is a story that reads from left to right, or west to east. His use of crayons, a controlled and predictable art medium, may attest to his need for control. This seemed in marked contrast to his apparent lack of control over his heroin addiction.

Michael's road originates in the west portion of the paper, travels north, and leads to a "T" intersection in the east section of the paper. Impeded by signs reading "DEAD END," the road reverts back to its origins only to be opposed by another "DEAD END" sign. After completing its circular course, the road narrows to a single line that suggests "burn-out" or that Michael's life force is dwindling away. There is a sense of futility, as Michael's alternative paths and return journey conclude at signs declaring "DEAD END." Michael drew several yellow warning signs in an apparent attempt to warn himself about impending danger. The "T" intersection implies ambivalence about relinquishing his drug

addiction. Michael believes his options are limited, as both his alternate routes are blocked and his journey brings him around in a full circle.

I held the paper at a distance and rotated the image while encouraging Michael to discover any image or form. I have found such distancing may liberate as yet unacknowledged content in the client's art by providing a psychological "comfort zone" which, in turn, may create more favorable circumstances for clients to recognize their imagery. At a distance, the artwork can be experienced as "other" and the client's artist-self can give way to a viewer-self with the potential to objectively consider the imagery's hidden agenda (Schaverien, 1992).

Michael was astonished to recognize his road as a large "heart-shaped syringe." He laughed as he boasted, "Drugs are my true love! Unlike women, I can always count on it to be there for me." The heart is pink with a yellowish center, possibly suggesting his intense neediness and "love" for heroin. Malchiodi (1990) relates heart-shaped imagery to an intense necessity for nurturance; therefore, Michael's "heart-shaped syringe" and spontaneous associations may allude to an attempt to substitute heroin for lack of nurturing. His inability to soothe himself seems to have led Michael to use drugs

as a synthetic pacifier. Michael's use of color may also indicate he feels "in the pink" when experiencing the mind-altering effects of heroin. His black road with yellow center-lines resembles the arteries or veins that transport the heroin through his body.

Michael used Cray-pas to write the words, "ONE WAY IN-ONE WAY OUT," suggesting that his dichotomous thinking does not recognize a middle ground, but insists on an "all or nothing" attitude. Such polarized thinking is also visible in his depiction of a sunny blue sky in the west, as opposed to ominous blues and reds in the east. In the surrounding landscape, his road functions as a divider between the dark brown mountains in the north and the pale yellow-green grass in the south. This use of color may reveal Michael's struggle between his nourished and healthy self (brown) and his weak, fading self (pale yellow-green) (Furth, 1988).

Often, words placed in graphic material may represent a client's attempt to draw the therapist's attention to something he or she wishes to address (Case & Dalley, 1992). Asked to elaborate on the red phrase in his drawing, Michael said, "I've always used drugs and I'll go out on drugs." His comment conveys a reluctance to change self-destructive behaviors. Michael's drawing includes several images that suggest impending death: the sun departing in the west (Bertoia, 1993), the tapering and fading road, the "DEAD END" signs, and the fatalistic implications of the phrase "ONE WAY IN-ONE WAY OUT."

Michael's road drawing ultimately was useful in helping him recognize and take responsibility for his addictive behaviors. His "heart-shaped syringe" offered visual proof of his "love" and need for drugs; the road in his drawing seemed indicative of a road to self-destruction. Because Michael seemed overwhelmed by the drawing's sense of hopelessness and pessimism, I closed the session by reminding him of his ability to build new paths. He smiled and nodded his head in agreement.

#### Trail to Impending Death

Sharon, 39, was referred to art therapy while hospitalized for a depressive episode

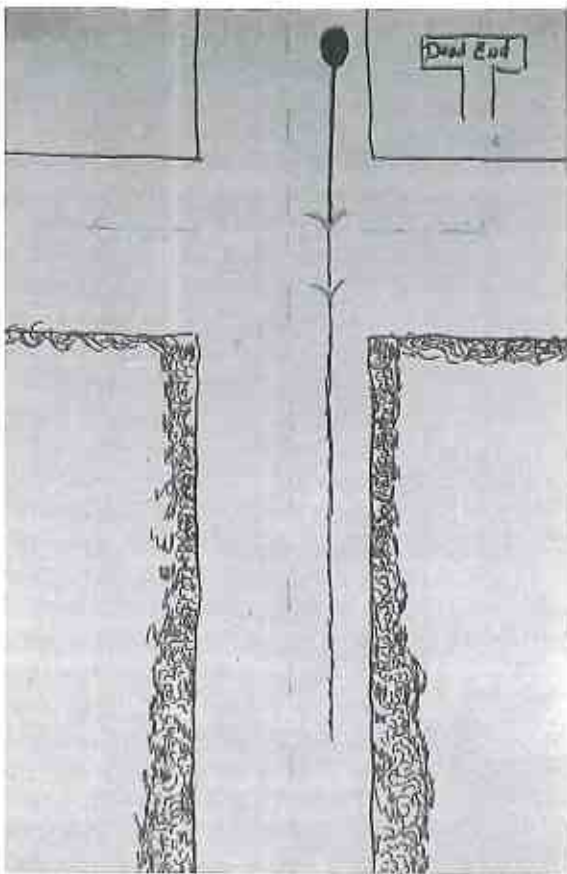


Figure 2

compounded by a recent suicide attempt and an unacknowledged addiction to prescription medication. She contended that she had accidentally overdosed on several prescription medications, and maintained that, contrary to her psychiatrist's view, she was not suicidal. Sharon refused to recognize her covert suicidal behavior or her addictive practices. She argued that she was not a "drug user," but was merely taking medication prescribed by her family physician.

Asked to draw a road, Sharon was hesitant and approached artmaking with misgivings. She employed a vertical format, suggesting that the image might represent her effort to announce something or attract the viewer. Sharon asked for a ruler and 2B pencil, which she used for an initial layout of her road drawing. Her reliance on a ruler and need to develop an initial outline seemed to suggest insecurity, and a need for both control and external support. Unable to maintain these self-imposed controls, Sharon soon discarded the ruler and pencil in favor of

colored markers, at which point she began to draw more freely.

Sharon's road (Figure 2) originates in the south and travels north until arriving at an intersection where she is confronted with a choice or decision. In an effort to portray movement, Sharon drew a sketchy line which steers the viewer's eye up the road and through the intersection. The sketchy quality of her line implies that Sharon is insecure, timid, and uncertain as she approaches the intersection.

Sharon's apprehension and indecisiveness at the intersection are apparent. She drew arrows pointing down each opposing path, as well as a series of yellow V-shaped lines that suggest her difficulty in choosing a path to follow. "I don't know which way to go," she said. Ultimately, she chose to continue on her current path, drawing a firm black line directly to a "black hole." von Franz (1986) and Silverman (1991) link images of black spots or holes with dying, death, and a sense of emptiness or nothingness. Sharon drew a warning sign that read, "Dead

End" which, as in Michael's case, seemed an effort to warn herself of the danger of continuing on the same course. However, she chose not to heed the warning.

I again held the image at a distance and rotated the paper while encouraging Sharon to discover any image or form. She appeared dismayed to recognize her road as a large cross, possibly alluding to the crucifixion and the endurance of suffering (Bertoia, 1993). Sharon lined the shoulders of her road with flowers, giving her image the appearance of a wreath or graveside memorial. She was horrified to discover that her image revealed her covert suicidal thoughts and self-destructive practices, but quickly sneered at her discovery and discredited the significance of her imagery in an apparent effort to defend against feelings of uneasiness.

Sharon's road drawing was instrumental in helping her to begin recognizing and taking responsibility for her suicidal and addictive practices. Before making the road drawing, Sharon was reluctant to acknowledge her drug dependency and its self-destructive effects. Although she tried to discredit the consequential meaning of her imagery, Sharon's drawing was an initial step toward recognition of her course of self-destruction. Crippled by indecision and feelings of helplessness, she felt compelled to disregard her warning sign and continue on a course of self-medication. She was visibly shaken by the evidence of her road to death, so I reminded her that the road provided alternate paths. "I'm afraid to choose a road; but, I don't like where this road is taking me," she said. I then encouraged Sharon to heed her warning sign, assert her power of choice, and detour from her path of self-destruction.

#### Weather-beaten Path

Leslie, a 15-year-old female, was hospitalized for a depressive episode and suicidal ideations brought about by an alleged sexual assault by her stepfather. Leslie was guarded and suspicious, especially when questioned about her family life or factors contributing to her current emotional distress. Her mother reported that Leslie was feeling increasingly hopeless, suicidal, withdrawn, and had uncontrollable tantrums. Leslie reported several





Figure 3

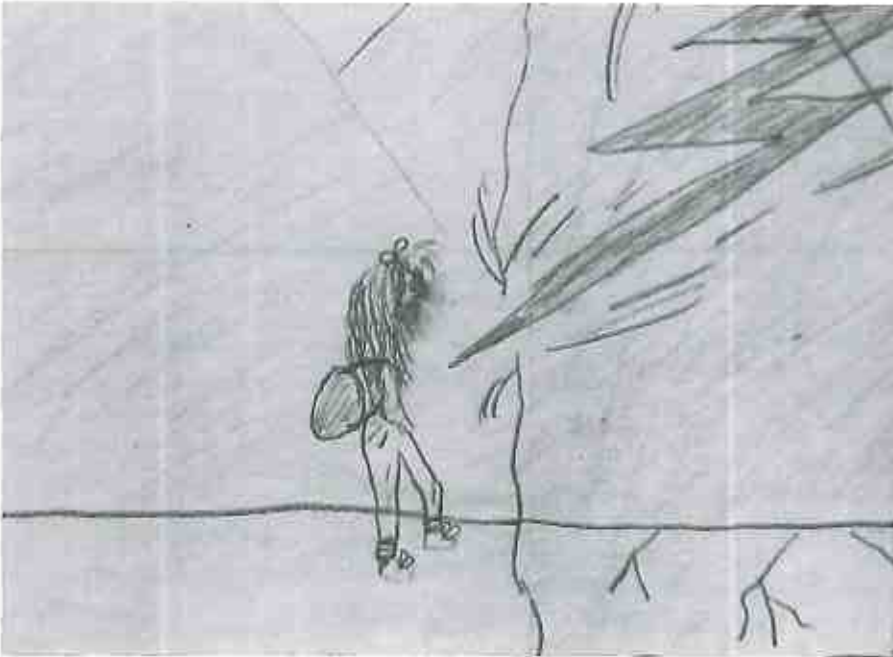


Figure 4

somatic problems, exhibited low self-esteem, and demonstrated pseudo-maturity in relation to her role within the family. She lived with her biological mother, younger sister, and stepfather.

Asked to draw a road, Leslie responded without hesitation (Figure 3). She chose a horizontal format, suggesting her road is narrative and events can be interpreted

from left to right. Leslie used colored pencils, a controlled and predictable art medium. She depicted a likeness of herself that has set forth down her road and been confronted by a "ferocious dark storm," which may represent her psychic environment or what she perceives as the hostile and unpredictable circumstances at home.

The heavens reveal much about her family's dynamics and the household's current response to outside forces. Leslie identified the top left cloud as her sister, the adjacent cloud as her mother, and the small lower cloud as her stepfather. The clouds are depicted with one eye open and the other eye closed, suggesting that the family "sees" something which they may be denying. The eyes also give the impression of a wink. Leslie described her mother as "the cloud hiding behind the mountain," implying that her mother is remote, unable to cope with the circumstances at home. Sgroi (1982) states that mothers in incestuous families tend to be "psychologically absent" from both the husband and children. Leslie's mother seems to be scrutinizing the "offending" actions of the smaller cloud (stepfather), as she looks on with disapproval and anger.

The large cloud to the left (Leslie's sister) is seen hurling a small lightning bolt. Her sister glares toward the western sky where a sun and several clouds seem to express sadness, remorse, anger, and fear. Leslie identified these images as her caseworker, therapist, and other mental health professionals, who appear helpless and oppressed as they watch the storm unleash its destructive force on Leslie. The sister looms in front of the smaller cloud (stepfather) providing him protection and shelter. The sister's thunderbolt may be an expression of her anger, as well as a warning or display of power that will hold opposing forces (social services) at bay.

The small cloud (stepfather) is portrayed hurling a lightning bolt toward Leslie. It is shaded with flesh tones and its tip is red, consistent with the color of a penis, and it tears through the protective barrier. The trajectory of the lightning bolt leads the viewer's eye to Leslie's pelvic region where her arm is depicted as draped across her body in an apparent attempt to protect or shield herself (Figure 4). The trajectory also guides the viewer to a purse draped over Leslie's shoulder which seems a clear representation of a penis. Once transgressed by the stepfather image, Leslie's road shatters.

Leslie was able to use her road drawing to portray family dynamics and her sexual

trauma. The artmaking process provided relief. The road drawing provided Leslie with a means of expressing feelings that otherwise might have remained hidden, such as her concern that she and social services staff were incapable of adequately protecting her from the stepfather's abuse.

Although Leslie did not recognize all the symbolic significance of her imagery, the road drawing was instrumental in helping her to disclose her sexual trauma. Leslie was able to see the reparative potential. "It's all cracked up, but I can fix it." I emphasized that the road's structural integrity remains intact.

### Discussion

I have tried to demonstrate the usefulness of road drawings as a therapeutic metaphor. The case examples illustrate the road's symbolic and metaphoric significance.

These case examples demonstrate that the projective properties of road drawings can provide swift access to personality traits and behaviors that clients are reluctant to acknowledge.

Road drawings, like any other theme, must be employed with careful attention to clinical goals and with full awareness of the client's therapeutic needs. McNeilly (1983) warns that themes have a tendency to elicit content so abruptly that it is often difficult to contain or comprehend the material.

Only the client can ultimately understand the full significance of his or her own road drawing; thus, premature interpretations can easily impede the natural unfolding of this deeper meaning.

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