藝術治療衡鑑在精神疾患之應用

蔡淑華1,2、洪寶蓮3、李俊德4,*
1財團法人台灣省私立高雄仁愛之家附設慈惠醫院
2國立屏東教育大學教育心理與輔導學系
3中國醫藥大學運動醫學系
4高雄醫學大學醫學院醫學系
*通訊作者

摘 要

表達性藝術使用一種不需依賴語言的溝通模式，去提供探究個人心理問題的可能性，目前心理治療者已經普遍認為繪畫是可以作爲個案目前心理狀態優劣的指標。本研究目的為運用藝術治療衡鑑來了解情感性疾患患者接受藝術治療後的各種特質，透過觀察和衡鑑其繪畫表現，進一步探討應用藝術治療衡鑑的方式。個案為台灣南部某一精神專科教學醫院所轉介的一位女性情感性疾患患者，其第一軸診斷為憂鬱症，第二軸診斷為邊緣性人格，轉介原因爲重複自傷、衝動、易怒及不穩定的人際關係和自殺行爲。個案於2006年至2009年醫院治療期間，以階段式共接受53次的個別藝術治療後，再使用Rawley Silver所設計的Silver Drawing Test(SDT)與Draw A Story(DAS)爲其進行衡鑑，以測量其情感狀態、人際知覺、動機、興趣及態度的特質。藝術治療衡鑑結果顯示，在SDT的預測值及觀察值表現正常；想像畫的測驗評估顯示個案的情緒程度極端負向的表現，其選擇能力具有靈活性及想像力，有結構完整的想法，能運用隱喻的方式來表達，且顯示個案有能力去討論抽象的思維，關於繪畫及表達等組織能力，並無明顯障礙。DAS的測驗評估顯示個案的真實狀態爲恐懼、挫敗、不幸與害怕的，屬於中等負向的水準，一般情感性疾患之個案在接受治療療程後，治療者通常會以個案轉介當時所困擾的狀態、頻率與深度，來評估是否改善其問題，但往往忽略了個案回到生活的常模中，仍有潛藏負面情緒的危險的可能性，因此治療者可以利用SDT及DAS等藝術治療衡鑑，作爲憂鬱和情緒需求的一種篩選工具，進行追蹤其可能潛藏的憂鬱或其他未被發現的問題；另外這兩種衡鑑工具操作簡單且不費時，其評分準則可以透過學習，而由藝術治療師、學校老師、心理師或其他接受訓練的研究人員進行評分使用。

關鍵字：衡鑑、藝術治療、邊緣性人格疾患
The Applications of Art Assessments in the Psychiatric Patient

Shu-Hua Tsai\textsuperscript{1,2}, Bao-Lien Hung\textsuperscript{3}, June-Der Lee\textsuperscript{4,*}

\textsuperscript{1} Tsyr-Huey Mental Hospital, Kaohsiung Jen-Ai’s Home
\textsuperscript{2} Department of Educational Psychology and Counseling, National Pingtung University of Education
\textsuperscript{3} Department of Sports Medicine, China Medical University
\textsuperscript{4} Faculty of Medicine, College of Medicine, Kaohsiung Medical University

* Correspondence author

Abstract

Expressive art therapy is a non-verbal communication mode that offers the opportunity to explore individual psychological problems. Nowadays, psychotherapists have genuinely considered drawings as a valid assessment on the mental status of individuals. In our study, the art therapy assessments were subjected to reveal varies traits of a psychiatric patient after art therapy. The client, referred from a teaching mental hospital in the southern Taiwan, is a female adult diagnosed with Major Depressive Disorder as well as Borderline Personality Disorder. Her original clinical symptoms upon referral were characterized by the self-inflicted injury, impulsion, irritability, instability of interpersonal relationships and suicidal behaviors. During her hospitalization from 2006 to 2009, she accepted totally 53 individual art therapies. After a few months later, further art assessments including the Silver Drawing Test (SDT) and Draw a Story (DAS) were followed to evaluate her emotional status, perception of interpersonal relationships, motivations, interests and attitudes. As the result, the Predictive Drawing Task and the Drawing from Observation Task of SDT both manifested normality. Meanwhile, the Drawing from Imagination Task of SDT indicated moderate degree of negative emotions, and her ability to “Select” was characterized as conceptual, imaginative and of well-organized ideation; her ability to “Combine” as well as to “Represent” showed no obvious barrier. However, both DAS and the Drawing from Imagination Task of SDT indicated moderate degree of negative emotions, which manifested her feelings of fright, frustration, misfortune and fear. Therapists commonly would evaluate progress in the related referral issues, yet oversee the possibility of underline dangerous emotions. These results suggested that we could utilize art assessments, such as SDT and DAS, to screen a client’s hidden and plausible risky depressive mood or other undiscovered problems, especially when both art assessments are not time-consuming and can be easily learned or used by art therapists, teachers, psychologists and other researchers.

Key words: assessment, art therapy, Borderline Personality Disorder