An Adlerian and Art Therapy Approach to Understanding and Treating
Psychopathology & Sex Offenders

A Research Paper

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Abstract

The treatment of Sexual Offenders is little understood. In the past sexual offenders were civilly committed and remained in high security facilities. This Thesis explores the impact of early child abuse, and the long-term effects through an Adlerian Lens. It also explores the importance of understanding how the psychopathic or criminal mind operates, in order to provide successful treatment using Adlerian techniques and Art Therapy. Though out this paper the use of he/his is used to refer to clients because this writer was only exposed to working with male clients.
This Thesis is dedicated to my Children:

Sarah, Sean, Josh, and Emma

Who sacrificed time with their mom, and encouraged

me to finish the Journey that I set out on.
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Someone was once quoted saying, “You can’t know where you are going until you know where you have been.”

**Lifestyle Development**

Adlerian psychology recognizes that there are critical periods in the development of a child; and it is based upon the premise that early childhood experiences and memories that are influential in understanding the adult lifestyle. By around the age of five, the lifestyle, our cognitive blueprint, the belief system is well formed; the child has developed his/her beliefs about life, based on what has been experienced in the living environment he/she has been living in (Shulman & Mosak, 1995). Each individual develops a unique set of rules, and unconscious beliefs about what is, and what should be, which then acts as a behavioral guide. Each child is born into a unique family situation and unique experiences. Combined with the atmosphere, the family values, and parenting styles are all influential in how a child develops their own “set of rules” and unconscious beliefs. The way a child responds to the situation is guided by the individual’s subjective perceptions of it and how the environment responds back. This interaction between the child and other members of the family is what Adlerian’s refer to as the family constellation.

In a study done by Graham, Kimonis, Kline, and Wasserman, (2011) in their research on causes of Psychopathy and abuse subtypes, what they found was that the literature from previous studies focused on biological and temperamental indicators as increased risk factors. Largely overlooking the impact of childhood abuse or maltreatment, which is what they believe, is strongly correlated with the development of psychopathy, a form of a personality disorder which
is multidimensional and has been linked with general violence. In addition, it has been linked to sexual violent acts as well. Furthermore, they found that there appears to be a link between Psychopathy, childhood abuse, and male sex offenders.

According to Slavik, Carlson, and Sperry (1995), people who have experienced childhood sexual abuse often have difficulty later functioning in daily life compared to those who have not had such experiences. Research confirms that a history of childhood sexual abuse is associated with having a greater risk of mental disorder and adjustment problems in adulthood. Included in these problems: adults are much more likely to manifest symptoms of depression, self-destructive behavior, anxiety, and may experience strong desires to isolate, have increased tendencies toward re-victimization, substance abuse, and poor self-esteem, as well as absence or avoidance from sexual activity (Slavik, Carlson & Sperry, 1995).

As stated earlier, the convictions, feelings, and behaviors that the child has experienced in early childhood, becomes organized into a consistent lifestyle, which becomes the guiding lines and influence the person’s goals and rules for life. It is then that every thought, feeling, and behavior is subject to these guidelines. The Adlerian theory suggests that adults may develop many different lifestyles as a result; but there are two extremes that appear frequently: one becomes either a defiant and revengeful lifestyle, or one develops a hopeless and inadequate lifestyle (Slavik, Carlson & Sperry, 1995). In the abusive family, how a sexually abused child reacts will be based on complex family interactions and can be defined by response of family values, moods, and relationships to the sibling constellation. The child either accepts or rejects certain values, beliefs, and behavior. Family values in abusive family often include male entitlement to dominate and devalue females. Children often become subservient to the adults, and they experience loss of contacts or interests outside the family. In families that experience
this kind of abuse, children can also become confused with sexual behavior and the typical comfort and affection that they receive from parents or family members. It is not uncommon in these families for there to be a lot of distance, deceit, blaming, competitiveness, violent behavior, anger, and a lot of concealed feelings (Slavik, Carlson & Sperry, 1995). It is also important to remember that in sexually abusive families; there is frequently physical and emotional abuse going on as well.

Over time the abused child begins to feel worthless, shameful, guilty, self-blaming, isolated, powerless, and incompetent. Abused children respond to the situation ranging from revenge, and criminal rejection of social demands; others submit to the control of others through pleasing or submission. Defiant and defeated children become un-trusting and aggressive and may begin to act out with delinquency; while other children become extremely dependent, eager to please and self-indulgent. This is also what distinguishes between internalizing and externalizing responses. One child may respond to trauma or to the traumatic event with regression and depression another may respond with aggression (Slavik, Carlson & Sperry, 1995).

Defiant personalities focus themselves on getting revenge; as well as disproving the world's judgment of them as being worthless. They may also become perpetrators of childhood sexual abuse or sexual assault themselves. Where as, defeated personalities begin to passively submit to the world's apparent evaluation of them as being worthless, they experience little confidence, and they also avoid taking responsibility for their behavior and actions. They are close minded and rigid in their thoughts of themselves as being worthless. Interestingly, you may also find them attempting to meet rigid and unachievable goals in life in attempt to prove their value. However both the defiant and defeated personalities have some common ambitions. In
general they tend to be hypervigilant and/or hypersensitive, and may be “other directedness.” They both have the same goal, which is to reject and devalue others; but they take different social routes to do so.

According to Adler, avoidance behavior is built into a person’s guiding line (Ansbacher & Ansbacher, 1956). The purpose or motivation behind avoidance behavior or exclusion tendency; is that it allows a way of avoiding the real confronting problems of life. Due to lack of confidence a person will seek only situations in which they know how to respond, and in which one feels able to beat or dominate a situation. In both defiant and defeated personalities, they take avoidance to an extreme, a whole new level. Due to the cognitive distortions and mistaken lifestyle convictions, this increases the client’s need to avoid. It may include denial of feelings or events, and of their importance and their consequences, forgetting, disassociation or amnesia, they will often minimize feelings related to the events of childhood, as well as the consequences of current or past adult behavior (Slavik, Carlson & Sperry, 1995). As this writer began to research psychopathology and civilly committed sex offenders from an Adlerian perspective, it quickly became clear that assessing a client with the use of the Adlerian lifestyle analysis to better understand the clients early childhood experiences would bring insight and understanding to not only the therapist, but also the client. It would be a tool that would help connect how the early child experiences had impacted their life and would provide the client and this writer with insight and understanding, as to what led up to their offending cycle. This writer strongly believes that until a client has this understanding and has been able to look at the mistaken beliefs that were developed in early childhood, it is difficult to change those mistaken beliefs and behaviors that have developed as a result. It is difficult to change something that is unconscious thoughts and beliefs when you do not understand where they came from.
Thoughts and Theories Around Violence

Throughout history, there have been many thoughts and theories around violence. A conservative criminologist, James Q. Wilson for example, has written that, “there is no such thing as underlying causes of crime,” in fact he suggests that we should just abandon the attempt to discover and eradicate any “so-called causes” and simply continue with our previous approach to crime such as: imprisonment and punishment (Gilligan, 1996, p.89). In an essay that was written by Carol Smart "the continuing search for theory, the cause, and the solution" is simply futile misguided and counterproductive, hopeless waste of time and energy” (As cited by Gilligan, 1996).

Then are the value judgments’, “He must be just evil,” has often been used to explain a person's violence. Usually this happens because no one understands why an individual would commit such a crime, when there appears to be no obvious motive for it, or in addition, it is so heinous of an act, it simply defies all human understanding (Gilligan, 1996). This writer believes that moral and value judgments about violent behavior that deem as, “bad or evil” or “guilty,” are just value judgments about it, it offers no explanation, and it offers no therapeutic approach to treatment.

In a sex offender program where this writer has interned, the clients have served a prison sentence before being civilly committed into the program. It is James Gilligan’s (1996) and this writer's belief that for sex offenders, living in a maximum-security prison and/or mental institution, in such extreme environments; only adds to or increases the damage that has already been done to the soul, mind, racial pride, and self-respect. Clients become incomparably more damaged, which also makes clients more vulnerable and threatened than anywhere else. The prison system only amplifies the inmate’s feelings of shame and then deprives any sense of the
self-esteem, respect, power, and sexual gratification. All is done consciously and deliberately
upon the prison population by the correctional staff. It is these types of conditions that are felt to
be not only counterproductive, because it only amplifies the feelings of being brutalized; and is
dehumanizing to the point where inmates feel they have nothing else to lose.

Gilligan (1996) paints a detailed picture related to the ritual of "booking" as being a “total
degradation ceremony.” The ritual of the booking is part of the admission process into a prison.
Upon admission inmates are required to strip off their clothing and stand naked in front of a
group of officers, who then force them to bend over. Deliberately, with the only intention being
to terrorize and humiliate the new inmate into submission. Next, there is the spreading of the butt
cheeks so the anal orifice is exposed to the whole group then there is digital rape which is to look
for anything that may be hidden. The behavioral paradigm of shame is found in the withdrawal
and covering of the portion of the body that socially defines one's public appearance of shame (p.
134).

Gilligan (1996) offered one example in his work with a violent inmate who for weeks had
been yelling at, insulting, threatening, and assaulting other inmates. After finally asking the
inmate "what do you want so badly that you would sacrifice everything to get it (p.106)? This
inmate, who was usually so inarticulate, discouraged, and agitated, that it was difficult to get a
clear answer to any question that he asked, this man stood up and replied with calm assurance
and perfect coherence. "Pride, dignity, and self-esteem." And even more clearly than before, the
client added, "and I'll kill every mother Fucker in the cellblock, if I have to, in order to get it!
"Life ain't worth living if there ain't nothing worth dying for." “If you ain't got pride you ain't got
nothing!” (Gilligan, 1996, p.106).
According to Gilligan (1996), “Beneath the mask of violence” there is often a concealed and self-protected self-image that is so vulnerable and easily hurt or even destroyed by other people's laughter, neglect, indifference, or rejection. Often trivial incidents have led to major violence. It is the very triviality of the preceding incident that provokes the violence because the more trivial, the greater cause of, and the more intense feelings of shame.

While working on my graduate studies and trying to decide which population this writer would like to work with as a therapist. This writer had been feeling this pull toward working with people involved in corrections or in the legal system; and had already more than begun to do research to gain understanding about the kinds of people that end up behind bars and what kind of therapeutic interventions they were receiving. This writer also researched and looked for commonalities in the inmates. What this writer found was that it didn’t matter what gender, race, or crime was committed, an underlying factor was that those who incarcerated had all or almost all experienced different forms of abuse in their early childhood. As this writer looked at this from an Adlerian perspective it became clear that working with these clients to help them understand their early childhood experiences and how it has impacted them through life, was not only necessary but it would be life-changing for them.

One evening this writer was fixing dinner when there was a knock at the front door of the house. Standing at the open front door was a police officer who requested that the writer step outside so we could speak in private. The officer then proceeded to explain that he had a warrant for the writers arrest; due to an unpaid dog running at large ticket. First of all my response was my belief that I'd already paid the ticket. This writers second response to the officer was,“ are you kidding me you are going to arrest me for a dog running at large ticket?” The officer replied,” I’m sorry ma'am but there is a warrant for your arrest and I need to take you in. The
officer allowed writer to go back into the house so that she could quietly tell her husband what was going on and so that he could distract the children so that they would not see their mother getting into the back of a squad car. The writer was frisked and handcuffed and placed in the back of the squad car; hoping and praying that none of the neighbors or my children were seeing this happen. This was just the beginning of one of the most humiliating, dehumanizing, and feelings of powerlessness and shame that this writer has ever felt.

This writer experienced what felt like, one of the longest ride she had ever taken. It was definitely long enough to start down the road of self-braying self-talk and feelings of inadequacy. When we arrived at the police station they drove the squad car into a garage and closed the door. Several other officers came out into the garage, then this writer was frisked again and then taken into the police station. This writer felt such humiliation and shame. Through my tears this writer tried to explain to the officers that this had to be a mistake. She had already paid for the ticket. Regardless of anything this writer had to say and my tears, this writer quickly found herself being treated as though she was no different than any other criminal. When this writer found out they wanted me to go into a holding cell while writer waited for bail money, this writer asked if it would be possible to go into another room instead of a holding cell. The officer responded, "I suppose we could have you wait in one of the interviewing rooms." this writer thanked him and asked if she could possibly use the restroom before going into the interview room. The officer responded that would be fine, he opened up a holding cell and let me in, closed the door behind me and locked it. When this writer looked around and saw that there was only a metal toilet, a metal sink, and a metal bed, she thought to herself, 'where am I going to go to the bathroom, I can't go on a metal toilet.'" It did not take this writer long to realize that this officer had lied and tricked me into going into the holding cell and he was not coming back anytime soon. This writer
went to the bathroom on metal toilet and then sat on the metal bed and waited. Since this writer's husband at the time was very abusive to me he was the last person that was going to be called to come and bail her out. This writer was allowed to make a phone call and that call was made to her older son who she knew would not judge her for the situation that she was in.

Eventually after several hours of sitting in a cold metal jail cell, a female officer came and got this writer from the cell so that she could speak to her son on the phone. She grabbed this writer by the arm and pulled her along, as though this writer was some hardcore criminal. This made the writer angry. If this was how this writer was being treated, how are others who come into this jail treated? It was very shaming and inhumane. This writer had no idea that this was the normal treatment for anyone who is brought to jail. Writer was allowed to talk to her son on the phone and was told of the plans that he had to get the bail money to the jail so that this writer could be released as soon as possible. The same way this writer was escorted from the jail cell was how she was escorted back to her jail cell. The metal door was slammed and the door was locked behind her. This writer sat on the metal bed and looked around at the situation and the environment, it did not take long for the dehumanizing effects of the environment and of the treatment from the prison guards to begin to eat away at any sense of dignity. There were moments in the beginning that this writer was able to stay in the reality of how crazy this all was, and was able to remind herself that she was a graduate student, going to be a therapist and this is not the type of lifestyle that she typically led. But it would not take long for other thoughts to start seeping in and taking over. Little by little this writer began to accept the reality of the situation and to realize and let it sink in that this was the current real life. The prison guards and the police did not care what I was there for, or anything about who I was, or what my profession was going to be; they were just doing their job.
This writer recalls that there was a point she consciously chose to give in and somewhat surrender. This writer just began to take it all in, and experience the feelings throughout her soul; allowing herself to just sit and feel the feelings and emotions that she was experiencing. It was then that this writer began to think about and imagine the effects that this experience could have on a person who was in this position long-term. Realizing how quickly this writer began to feel so inadequate in such a short period of time and even knowing that she would only be there for a short period of time. This writer could only imagine how such strong deep seeded feelings of shame and inadequacy could become so ingrained and become a part of their identity over time.

As sad and inadequate as this writer was feeling at that moment, she realized that she was not alone in that cell. God was with her and this writer began to feel that God had wanted her to experience for short period of time the feelings and thoughts that people who come into jail experience. How else would this writer ever be able to relate to and begin to understand the feelings that inmates feel living in this environment? When this writer was released she told herself that, “this was one of the worst experiences that she had ever had and that she never wanted to forget it.”

In trying to come to terms with this experience this writer used art therapy as a tool to look at this experience from a different perspective. This writer built a small replica of what she remembered the jail cell to look like.
However, it wasn't until later that this writer realized the cell that she had built did not have a door or any bars, that kept her locked in, and it had a removable roof, which had a cross on it to remind her that she was not alone and that God was with her. However, as this writer shared this story, this point was brought to my attention, and it has lead me to consider if this jail
cell was more like the one that this writer was living in at home as she was living in survival mode in an abusive marriage.

According to Gilligan (1996), "to understand violence, there must be a reverse in the procedure; we must learn to interpret each action as specific symbolic language with a symbolic logic of its own" (p. 62). Understanding violence requires translating violent actions into words. To understand murder in other forms of violent behavior we must translate its purpose and meaning into words and thoughts understanding violence requires understanding what thought or violent behavior symbolically represents. Fantasies are symbolic representations of actions so they can precede actions and service substitutes as well. Actions are representations of the thoughts actions can proceed and serve as substitute for conscious thoughts the client can then take the place of thinking in words and ideas. All behavior is meaningful; all-behavior is the embodiment or enactment of a purpose or a wish (Gilligan, 1996). Actions also serve as a means of expressing the feelings associated with the thoughts, such as love, hate, sadness, and fear. The symbolic medium is physical action rather than words. Again, to understand murder and other forms of violent behavior must translate its purpose and meaning into words and thoughts. Understanding violence requires understanding what thought or violent behavior symbolically represents.

**Early Recollections: In Changing Mistaken Beliefs**

In Adlerian psychology early recollections or early childhood memories have been used to facilitate an investigation into a client's lifestyle. According to Mary Lingg and Terry Kottman, (1991) the client only chooses to remember memories, which he feels, however darkly, to have bearing on his situation today. In other words they represent, “the story of my life.” This is the story, which the client repeats to himself, to warm and comfort him. It allows him to
concentrate on the goal and prepare him by means of past experiences. Early memories reflect the client’s current self-image, views of the world, and the style of interaction, which he uses with others.

Gathering the early memories from the client can help the therapist to begin to understand the client struggles, attitudes, hopes, and behaviors (Papanek, 1972). As a therapist begins to gather information from the early recollections the therapist can begin to understand the client struggles, his attitudes, hopes, and behaviors. It also can give clues as to the clients strivings and the ways in which a client gain significance it also can indicate the values which a client subscribes to, and the dangers the client wishes to avoid. These ideas that are governing the clients behavior may or may not be within the clients awareness. "Children are expert observers but make many mistakes in interpreting what they observe. They often draw wrong conclusions and choose mistaken ways in which to find their place” (Dreikurs & Solz, 1964, p. 15). Once these things are discovered, it becomes the goal of the therapist to help the client see how these ideas are false; and how they can interfere with effective social and personal functioning (Manaster and Corsini, 1982). According to Richard Cobb and Daniel Eckstein (2004) early recollections can be effectively used as metaphors in therapy.

**Associations among Childhood Abuse and Psychopathy**

As was mentioned earlier much of the research has identified childhood abuse as an increased risk factor of the development of psychopathology. In a study done by Graham, Kimonis, Kline and Wasserman (2012) they took it a step further by examining the association between specific types of maltreatment. In a study using PCL- R (Psychopathology Checklist-Revised) total and facet scores with a sample of 223 adult men who were convicted of sexual offenses and who were being evaluated for civil commitment; they were able to associate
childhood physical abuse and neglect with antisocial behavior; as well as emotional detachment traits to be associated with childhood neglect for child molesters. However they found rapists to score higher on these traits irrespective of the neglect history (pp. 66-75).

Weiler and Widom (1996) (as cited by Graham et al.) compared the scores of psychopathy scores of 652 individuals who all had legally documented histories of childhood abuse, including physical or sexual abuse, and/or neglect combined. With a matched control group of 489 individuals with no documented history of abuse or maltreatment. In comparing the PCL-R scores, vendors with a history of childhood maltreatment scored higher in self-control and more frequent in temper on psychopathy measures than those without such a history.

School violence including the dramatic episodes in 2000 with the Columbine school shootings and the Virginia Tech shootings in 2007 has brought with it added research interest; related to the role of bullying and adolescent adjustment and aggressive behavior. According to Ragatz, Anderson, Fremouw, and Schwartz (2011) researchers have started to look at criminal thinking patterns, aggression styles, and the psychopathic traits of late high school bullies and bullying victims. The studies have concluded that by comparing bully victims, perpetrators of bullying, and victims who also become perpetrators. They actually differ on several psychological and behavioral dimensions. As they began to compare how bullies and bully/victim's differ from each other, they have found that bullies/victims show higher levels of anxiety compared with bullies (who were not victims of bullying) they are found to exhibit lower levels of self-control and more frequent displays of temper compared with bullies. They also have greater hyperactivity and poorer ability to regulate their emotions and they found the bully/victim's to have more depressive symptoms compared to bullies.

Shame and Psychopathology
Shame is a self-conscious emotion that plays a part in the development and/or maintenance of psychological problems. According to Mirela Candea and Szentagotai (2013) their research focused on different directions in which shame can affect the therapeutic process, including; shame as a predictor, as a mechanism for change, and shame as an outcome. They discussed the basic emotions such as fear, sadness and joy but went on to evaluate further the self-conscious emotions such as shame, guilt, pride, and embarrassment. Shame defined as a person who has a negative evaluation of the entire self; and is characterized as the sense of self as a whole, as being flawed. More specifically the focus was on two types of shame: internal shame, which is a negative evaluation of self. External shame is the fear of how others evaluate us. Additionally, guilt and shame were discerned by a clarification shame is related to the entire self as a person and guilt being related to a certain behavior. While both shame and guilt are negative emotions the feelings associated with shame tend to cause more painful and damaging to a person (Candea & Szentagotai, 2013).

Much of research that has been done on shame has revealed an association with social phobia, generalized anxiety, bipolar disorder and found to be associated with depressive symptoms. Additionally, in clinical studies higher levels of shame appears to be associated with eating disorders when symptoms of depression were also exhibited. Persons who display a high level of shame-proneness in addition to the symptoms of anger one month after a violent crime was committed toward them was found to be a positive correlation of PTSD symptoms. Higher levels of non-verbal shame were found to be correlated in a person who is displaying symptoms of borderline personality disorder (Harder, Cutler & Rockart, 1992).

This Writers Personal Experience of Being Victimized
As this writer has begun to think about the questions that this thesis should answer such as why is it so important to this writer that she understand the thoughts and behaviors behind psychopaths up until this point, this writer has not been able to answer such question. Other than coming up with just curiosity and wanting to have a deeper understanding about Psychopaths/personality disorders. When this writer would ask herself how having this knowledge would help her be a better therapist there still was no answer to be found; or at least on the surface. After being awake much of the night and contemplating things in life including her recent relationship with her significant other.

This is when the writer began recalling memories that she had previously blocked out and tried so hard to forget. It was an almost ten year marriage of a living hell. In the beginning he appeared to be a knight in shining armor; and she was a beautiful princess that was put upon a pedestal. She had three children from a first marriage and he was ready to help with the children, he helped with the cooking and cleaning. Then they got married; and when finding out that he was going to be a father to his first biological child, he was thrilled.

When the arguing first started, this writer recalls that it was so confusing. While she felt like the goal was to discuss a situation and problem solve. It always ended up just being this crazy fight. Even if she just agreed with him, he still wanted to keep it going. It actually took many fights that would last for hours, into the night, or it was being awakened to his wrath. This writer finally realized that we each had different goals. His was to be in control, to provoke fear, to take away any sense of power, to punish, to make the writer feel inferior and himself more superior. He saw himself as the victim. Once the writer began to figure out this game, she began to try to find ways to keep the peace, not to engage in an argument because this was simply about this man, my supposed loving husband, being abusive. The goal for the writer became to keep
the children from being exposed to anymore than she could help. Many hours were spent in the bedroom to attempt this. Over the years, this writer began to disassociate and numb herself to avoid some of the pain. When this happened then came threats to wake the children, mainly our daughter. When the writer did not respond, there were many times that he woke their young daughter up in the middle of the night, telling her that they needed to go to grammas house because mommy was not being nice. However, when this writer would not allow him to leave with their child, this writer spent time with the child trying to make her feel safe, and that everything would be ok, and help her fall back to sleep.

The only way that a fight would be over was if this writer apologized, accepted responsibility for the argument. But of course, it was only really over if the writer proved that she was sincere by having sex with him. This writer knew that this was insane, and inappropriate and unhealthy. But there were two things. The next day would come the deep apology and remorse, and the statements of how much he loved this writer. Like all abused women, we all hope that it will just stop and the good parts will remain. Eventually I began to address and try to set boundaries with him, and try to get him to take ownership of his behavior. Occasionally he would share stories of his early childhood, and the shaming and yelling that he had experienced as a child. However, in the end, he would minimize the behavior of his parents and he was unable to make any connection between his experiences and how he was behaving with this writer and her children.

As this writer stated earlier, it is with strong conviction that she feels that there must be an understanding and awareness of perpetrators own childhood victimization and then to learn how it has connected and played out in his perpetrator cycle. In this situation, it was too painful for him to hold his parents accountable for what they had done to him, he saw himself as the
victim in our marriage, and was unable to work through the strong sense of shame that he felt for his own behavior. Rather than doing this, on an occasion when I had taken the kids and left him, he had told me he was now taking a medication to help with his anger and begged me to come home.

This writer came home. Over the next few months the kids and this writer could felt that there was less overall tension in the home. We were beginning to feel hopeful. What this writer did not know is that it was all a form of manipulation; he had contacted a lawyer the day that this writer came home (I didn’t know) to file for a divorce and ask for our home and full custody of our 8-year-old daughter. It was on a Friday when I found that he had a cell phone all of the sudden. Calls were coming in and going out between him and one woman. Since he had never had a cell phone before, I had to know something was not right. When I asked him about the calls and if he indeed was having an affair, I was obviously hurt and crying, his response was to laugh at me. I would say this was the callousness that we discuss in psychopaths/ and or personality disorders.

During the three months of my thinking that the medicine seemed to be helping and was beginning to feel hopeful for the first time. He was setting up the scene. Talking to everybody that he could and telling them how he has to do all the work in the home, care for the children and how neglected he has been etc…I was served with the divorce papers on the Monday after the cell phone ordeal. In complete shock, when I asked him what was going on, he told me that he had been planning and preparing since the day that I came back home. He made sure to inform me of all of the people around us that he had already spoken to over the last three months and that they would support him having full custody of our daughter. Since he had threatened to take her away from this writer throughout the marriage it did not surprise this writer, but it did
scare her, knowing what he was capable and willing to do, “to win.” He knew that this would be the ultimate punishment for me.

During that time this writer had a dog-named Duke who was very important to her. However, Duke had also lived in the same abusive confusing environment as the writer. Duke loved this writer’s family and wanted to do his job, as a boxer will do, which is to love and protect their family. However by the age of two Duke had bitten nonfamily members on at least two or three occasions. One specific memory that this writer had this morning was how the little girl was over to visit her youngest daughter and this writer had Duke on a leash keeping him close at her side. This writer sensed that Duke was watching this little girl as though he didn't trust her. In recalling the situation this writer felt that if she just kept Duke close enough to her he she would be able to prevent him from acting as a predator and possibly biting this little girl. Interestingly at the time, this writer was not able to look at her beloved boxer as being a predator, in fact she felt that if she kept him close enough to her then she could keep him from harming anyone and most of all keep the threat away of having to give him up. This writer knew that Duke was not mean and that he loved his family very much but the last person that he bit unprovoked was the vet; and the vet had informed this writers husband that, “something” needed to be done. While this writers husband (at the time) felt and wanted Duke to be euthanized, this writer could not yet accept this loss in her life. After receiving the divorce papers as a last attempt to hold on to the “Marriage” this writer informed her husband that she would agree to euthanize Duke. However, as much as her husband wanted it done and belittled this writer for not doing it sooner and accusing her of being selfish and uncaring about other people getting hurt, he refused to be the one to take Duke in to be euthanized. The narcissist that her husband
was, this writer felt like it was very gratifying that this writer had to be the one to euthanize what was then her best friend.

What this earlier recollection stirred up for this writer was related to her current relationship with her boyfriend who struggles with chemical dependency and alcohol addiction issues. This writer came to the realization, that similar to Duke her beloved boxer she feels the need to keep her loving boyfriend close to her side in order to keep him from making choices that have potential risk of loss and unhappiness, lack of stability in the relationship, lack of trust.

This writer can think of many things in many ways in which her beloved boyfriend shows his love for her and her children. However, in the past he has also made choices that could risk losing everything. As this writer thought about this deeper and what she was learning and gaining insight about around being victimized, and the importance of understanding the perpetrators way of thinking and to learn how to not continue to be the victim. A memory from a recent group came to this writer's mind. This group is related to schemas here and now and it was the first time that this writer would be facilitating this group on her own for approximately the last 20 minutes to half an hour. The first memory that sticks out prominently is the response that the group members gave when the normal facilitator informed the client's that she was going to have to leave group early one day. Some members openly expressed excitement at the thought of being able to get out of group early today. A member of the group who was sitting closest to me spoke up stating that he felt this writer would be just fine in facilitating the group on her own. The writer recalls how good and competent this clients comment made her feel; not only at the time, but in later recollections of this memory as well. While this client may have been completely sincere in his comment to this writer, this writer also recognizes that at that moment the client made the statement in the confidence that I felt at that moment I was potentially
placing myself in the victim position due to letting my guard down. As I now have a much better understanding of the mindset that somebody with psychopathology has, I am also more aware of the mindset that victims tend to have. It is the feelings of inferiority and lack of confidence in the behaviors that a victim shows, which is often seen by the perpetrator as weakness: easy prey that a perpetrator feeds off of and finds in his next victim.

So in search of answers to this writer's questions as to why understanding psychopathology is important to this writer. This writer finds herself not wanting to be or to allow herself to be in a victim position again. By understanding how perpetrators think as well as how victims think, this writer believes that she can protect herself better and use her knowledge and skills to work with offenders in a more therapeutic way and hopefully see through the façades, the different masks that individuals wear to cover up their true selves. This writer believes that over time, with new understanding when she puts on her therapist mask it will no longer be just a mask but behind it we'll have true deeper knowledge of the victim/perpetrator clients that she is working with. Having said all this one of the biggest insights that this writer has recently had is that if I am in a relationship that makes me feel like I have to keep my significant other on a leash close by to keep him from making choices and doing things that could potentially sabotage our relationship and everything else going on around us, then there is something truly wrong with this picture. It is not the writer who needs to control people around her from their choices. People make their own choices based on what is important to them in the long run.

People often ask this writer why she would stay in an abusive marriage for as long as she did. The answer to this question that I have given and will continue to give is that being in a relationship with somebody who has psychopathology/personality disorders they are smart, they
are able to keep the victim confused enough to think that there is truly something there between them that will cause the perpetrator to eventually feel true remorse and change their ways. However, the remorse does not come if the perpetrator feels he is the victim.

Gilligan (1996) addressed spousal homicides and what it is that drives these men to commit murder or other serious violence. What he believes is that it stems from an unusually strong wish to be loved and taken care of; and an unusual strong feeling of being inadequate and unlovable. When a perpetrator does not have these wishes fulfilled, then the feelings are intensified. Feelings of shame that are provoked are also further intensified; as are the feelings of rage and hate, the impulses of violence that shame stimulates. Thus murder or violence is a way of saying, "since I don't want to grovel to be loved by you, I will teach you. Men who are perpetrators want to be loved by their wife, if he had not wanted her love, he would not have had any reason to kill her! Instead the murder becomes a kind of undoing ritual that stops his loss of face. To murder the wife, in the perpetrators mind allows a change in his identity, which could only expose him to shame. This is the behavior of a wimp who was actually a grown man who down inside is really a helpless little boy; into an identity in which he could take pride.

This writer has experienced what it is like to live with a man who has been both a victim and a perpetrator, who is filled with narcissistic rage, who wants (demands) to be taken care of like a little boy; he wants his mommy, and as a man he wants his woman; but what this writer found out was that it is never, ever, ever, enough; and when this little boy did not get the attention and affection that he so wanted from “his mommy” he became the shaming critical father that he himself had lived with. Instead he took it out on, and hurt the people who loved him the most, innocent children and his wife. Throughout our marriage this writer was threatened that her husband would do everything he could to take away their little girl, and that he would
continue to make this writers life a living hell. After a long custody battle this writer experienced the most powerlessness feelings and the most pain that a women could feel. In the end he was able to accomplish what he had promised, with the help of our justice system.

Figure 3

These two drawings were both done after this writer knew that they were getting divorced; as a way of using art therapy as a tool to work through my own feelings. The above drawing (figure3) really expresses my feeling of being a strong woman who has been broken by this dark image that represents my ex-husband. In this picture you can see my heart large on my chest and tears falling from my eyes but this would not stop the shaming in humiliating verbal and emotional abuse that this writer had been experiencing.
The above drawing (figure 4) is representational of how I frequently felt; as I sat on a chair while he towered over this writer shaming and criticizing her, as well as intimidating writer by getting in her face as he yelled and said the many hurtful things that he did. In this image this writer was crying so much that she cried a heart-shaped puddle of tears on the floor. But this would not stop him from his behavior. The rage would not stop until he achieved whatever it was that he was striving for.
The two Lego structures that this writer built in the above photos (Figures 5 & 6) are a response to my internship site and the clients that this writer works with there. However it is actually this writer’s ex-husband that is sitting in the center of the room on a chair with a light over his head. The figures that are around him are some of the clients in the group that this writer works with, in the sex offender program. The clients that this writer works with in the sex offender program are held very accountable for their actions; past sexual offenses and in the current choices that they make today. This experience helped this writer to feel like his abusive nature is no longer hidden. He has no longer gotten away with what he did to this writer and her children. The men in the group would hold this writer’s ex-husband accountable for what he has done in his past. As this writer was creating this; it was very therapeutic and this writer did not feel like she was alone in trying to confront and hold writers ex-husband accountable; it felt like the group was being supportive and standing up for this writers rights. The experience was very cathartic and helped this writer to feel like she finally got to tell her story and in doing so this
writers ex husband was held accountable by men who could see through his minimizing and blame better then anyone, since they know the offending cycle. There were many times, even in court that this writers ex husband was able to fool people into believing he was the victim.

**Research in Working with Sex Offenders**

After this writer began her graduate studies in learning about Alfred Adler’s theory in psychology, this writer started doing research on what kind of therapy was being done in correctional facilities; even more specifically, in sex offender programs. In this writers research this writer came to the conclusion that the majority of people in prison including sex offender programs had experienced dysfunctional and/or abusive childhoods. As an Adlerian graduate student this writer recalls reading that in one particular sex offender program; one of the therapeutic techniques that they were using was, “thought stopping.” While there is very little research and research based treatment of sex offenders, in this writers mind, and after learning about early childhood experiences and the effect they have throughout life; this writer came to the conclusion that the type of treatment that she felt would possibly be effective was using techniques from individual psychology. In addition to this, in this writer’s research, writer also researched the use of art therapy as a therapeutic tool or intervention in working with individuals in a correctional facility; as well as sex offenders in a treatment program.

It is estimated that, “one out of every five girls will be molested before the age of 18” and, “92.7% of women will be sexually assaulted or harassed in their lifetime.” In the same study the research estimates that, “between 3% and 31% of all young males have been abused (Carich, Newbauer, & Stone, 2001). This writer believes that given these statistics, understanding and teaching sex offenders a way of understanding their own early childhood abuse and how it connects throughout life and in becoming a sexual offender would be therapeutic and life
changing. This writer believes that while sexual aggression is a complex and difficult problem to understand there are treatment strategies that can be beneficial. Identification of basic offending behaviors and typologies in the characteristics of offenders is an essential place to begin in doing therapy with sex offenders.

**Definitions and Characteristics of Sex Offenders**

Much of the difficulty in understanding and treating sexual offenders comes from the fact that sex offenders have been characterized by many things such as: type of arousal and deviant behavior, personality disorders, motivation, chronicity of deviant patterns, social skills age and gender of the of the victims, the age and gender of the perpetrators, and violence. Breaking it down further, according to Carich, Newbauer & Stone, (2001) there are two types of child molesters: fixated offenders: the primal attraction is to children typically there is early onset occurring in adolescence and extending throughout adulthood. Whereas regressed offenders: are primarily attracted to people their own age and are oriented to long-term relationships often these individuals lead normal lives into middle or late adulthood and then sexually offend against children.

According to a study by Groth (1979), he outlined three types of rapists: anger rapists, power rapists, and sadistic rapists. Perpetrators who are anger rapists use their victim as a target for their anger. Power rapists strive for control, domination, superiority, and mastery. Sadistic rapists enjoy observing and experiencing the suffering of their victim’s humiliation or degradation through sexual acts. A much simpler method of working with the 2 basic typologies: situational versus preferential (as cited by Carich et al., 2001). In situational offenders they typically prefer same age partners and are able to have normal social and sexual developmental patterns until later in life typically when they offend it is most often related to stress, and in their
victimologies are very limited. Whereas, The preferential offenders have chronic and repeated patterns of offending, they have deeply ingrained deviant arousal patterns, and they are primarily oriented toward sexual aggression.

What sexual offenders all have in common are a distorted private logic or cognitive distortions; and offending lifestyle behaviors. According to Adler, the distorted private logic serves as a safeguarding strategy in order to preserve the offender self-esteem regardless of the fact that he or she has committed behaviors that are shameful and appalling. It is the distorted private logic that allows the offender to continue offending (Ansbacher & Ansbacher, 1956).

**Personality and Lifestyle Characteristics in Offending**

Individual personality and lifestyle characteristics need to be taken into consideration. Listed below are six offender personality characteristics. Offenders will differentiate in having more or less of characteristics described below, as well as, the degree or level to which the offender exhibits the characteristics.

1. Asocial or psychopathic behaviors including: lack of empathy or remorse, especially for the victims, and criminal thinking.

2. Narcissistic behavior: very self-centered, act grandiose or superior to others, struggle with self-worth and self-esteem, the offender who feels inadequate can demonstrate an illusion of power which for a short time reduces the intense feelings of inferiority by asserting their power through sexual aggression to

3. Characteristics of schizoid behavior: lack in social skills, tend to feel alienated and isolated, have flat affect and problems with emotional recognition and are inclined to withdraw from adult relationships
4. Borderline features: core issues related to personal and interpersonal instability, issues with jealousy enmeshment, possessiveness, dependency, intense moodiness, often distorted thinking styles and tend to devalue or overvalue self and others.

5. Passive aggressive characteristics: experience intense feelings of inadequacy and inferiority to others, tend to be passive in their style of relating to others, especially in expressing anger, tend to express feelings indirectly rather than directly.

6. Disassociation behaviors: detachment from both conscious and unconscious levels of awareness, self-detaching from the current situation or stream of conscious. Specifically with sexual offenders it would include: deviant fantasies a higher level of inner focusing, disinhibiting mechanism, and the hidden observer effect (Carich, Newbauer, and Stone, 2001).

**Treating Sexual Offenders**

There are many distinctions in providing therapy with offenders who’ve committed other types of crimes, and those who are treating sexual offenders. Sexual behavior and fantasy is typically not a primary focus in therapy with persons unless they have committed sexual offenses. Providing therapeutic interventions with sex offenders is typically offense specific and is directed at understanding or gaining insight into the sexual deviancy and the distorted private logic or cognitive distortions that has allowed the sexual aggression. Examples of cognitive distortions that may be displayed is when an offender attempts to justify, excuse, deny, or minimize the actions or behaviors in order to allow himself to engage in sexual aggression.

People often ask this writer why would you stay in an abusive marriage for as long as she did. The answer to this question that this writer has given, and will continue to give, is that men who display psychopathic or personality traits are so manipulative that they are able to keep the victim confused enough to think that there is truly something there between them that will cause
the perpetrator to eventually feel true remorse and change their ways. However, the remorse does not come if the perpetrator feels he is the victim.

**Art Therapy as a Tool in Treatment**

This writer is not sure if the power of Art Therapy called out to me or if this writer sought out this powerful tool. However, as an Art therapy student it did not take long for this writer to personally experience the tremendous benefits of insight, the healing, and an alternative outlet to express very painful life experiences, when talk therapy was to difficult. This writer began to feel as though she was learning a powerful tool that would offer her an alternative method of helping her clients. As a strong believer in the Adlerian practices, Art therapy seemed a great compliment to this writers therapeutic suitcase. This writer strongly believes in the symbolic or projective images as an assessment tool and that it could be a great addition to the traditional assessment tools, especially in the evaluation of psychopathology, and in working in forensic settings. It offers clients a less threatening way of being able to express themselves. Since Trauma is stored as images in the brain (Appleton, 2001). Art therapy is frequently able to access more difficult or painful memories. It also is able to bring unconscious images to the surface; which can bring insight for both the client and the Clinician.

**Art Therapy Assessment**

In an article written by Linda Gantt (2004) she discusses her reasons for why she feels that art therapists must develop art-based assessments. This writer agrees with Harriet Wadeson (as cited in Gantt) in questioning why an art therapist would not seek to develop Art therapy for assessment. At the same time, in order to do this we need to decide devised scientifically sound and clinically sensitive art-based assessments. While the problem area behind projective drawings is connected to the rating systems, there are some researchers that have really worked
to improve this. Molly Harrower (1954) was one of the first art therapists to consider observing if there were significant changes and fluctuations between drawings over time. Margaret Naumberg (as cited by Gantt) believes the drawings reflect psychological state so by comparing drawings for changes whether it be for better or worse, change in a person has occurred.

For example, 2 drawings of a PPAT (Person picking an apple from a tree) were done by a woman who was sadistically raped and tortured by a stranger who broke into her apartment approximately one year before the two drawings were done. The drawings were done on day one in a therapeutic setting and did show significant changes in her second drawing. Using the formal elements of art therapy or feats scale, this offers us a measurable method on several scales including color, color fit, space, details of objects, her environment, and the ability problem solve (Machover, 1949).

According to Emanuel Hammer (1958), in addition to the content analysis, it is important to note the sequence, size, line pressure, strokes, the amount of detailing, symmetry or asymmetry, placement on the paper, the attitude which the client approaches the task. Whether the subject draws stick figures or full figures, the size of the drawings the pressure, proportions, shading, reinforcement, and erasures encompass structural or expressive phrase of the drawing (Hammer, 1958, p.64). The Sequential analysis initiate rises with a series of behaviors that are required on paper you may include it may provide clues to the amount of drive or energy that the subject is feeling at the time, and may provide data which allows an appraisal of the subjects control over this drive does he experience a progressive psychomotor decrease as he proceeds from one drawing to the next in a set of projective drawings could suggest increased fatigue; whereas, an increase in progressive psychomotor could suggest an increase in excessive
stimulability. In a depressed client their offering drawings are often categorized by either lack of
details or an inability to complete all of the drawings.

Size also can provide clues about the subject’s self-esteem or his characteristic of self
expansiveness, or his fantasy in which the client draws self inflated persons; while frequently
tiny drawings are presented by clients who are experiencing feelings of inadequacy and or
perhaps feelings of withdrawal. There’s also the hypothesis that a client who draws an overly
large figure may have a strong aggressive nature, it could also be a display of lack of restraint in
the size of drives correlated with aggressiveness and the tendency toward the release of
aggressiveness into the environment. Pressure has also been noted by displays of heavy strokes
from more assertive clients, whereas, light strokes were the result of either low-energy or
restraint or impression repression (Hammer, 1958).

Art Therapy and Forensic Work

Until recently there were only limited articles related to using art therapy with offenders
(Teasdale, 1997). Before I go any further this writer strongly believes that any therapist who is
interested in working with offenders and criminals must be willing to go to places in the mind
that were once marked dangerous and off limits. It is imperative to understand the “criminal
Mind” (Fjerkenstad, 2004) The criminal mind works on auto- pilot to hide, minimize, and even
deny any past or present criminal behavior. Until the therapist learns to identify the components
of the criminal mind, the therapist remains naïve and gullible; and the client will be allowed to be
less responsible.
Fjerkenstad (2004) has identified 9 components of the criminal mind so far.

1) A criminal never tells the full story. It is possible to lie through omission; to leave out crucial and sometimes even small elements that are enough to change the whole entire meaning of the story.

2) A criminal is able to lie outright. Lying is an brilliant tactic; it allows the liar to consider the accusations and use his/her creative abilities to rearrange the facts and events to put a spin on it and come up with a new slant or angle that will to get them off the hook.

3) A criminal won't notice the effects of his actions on others until he's caught or it's too late. Because the criminals psychological development has been stunted at an early age perhaps; two to six years psychologically, the criminal mind has little or no capacity or willingness to reflect on effects meeting his immediate needs has on others in his environment. This self-centeredness sometimes called primary narcissism.

4) The criminal overrides his knowledge of right or wrong. At some point while they are committing the crime they become aware of that what they are doing is wrong but they tell themselves to go ahead anyway; the active aggression is part of the satisfaction. At the time of the offense the criminal is getting his or her primary needs met.

5) The Criminal lives in the shadow of the gullibility and charity of others. The criminal thrives on getting second chances.

6) The criminal uses decoy personas to seduce others into believing his presentation of sincerity. (This is the scary part to me). Think about the sales people that you meet in a furniture store: their sincerity, encouragement and praise often lead a customer in making unnecessary or unwise purchases.
Well, very few child molesters look like child molesters even though they are child molesters. They may have an attractive girlfriend, may have nice cars and even a good job, and might even be a priest!

7) Criminals, like all of us, need a positive image of ourselves even if this means repressing or suppressing the negative realities just wanting to look good. In this situation a practitioner who is unknowledgeable about the way the criminal mind thinks and begins by working on the self-image; in this case it only in makes him more slicker, more seductive, less inhibited, and more careful and observant.

8) Because the psyche will often fragment into three parts when traumatized such as: the victim, the survivor, and the avenger; and each are functioning independently, passive aggressive traits come into play.

9) At this point the criminal mind is very dangerous until it begins to reintegrate and function together. With this client it is imperative that therapy recognizes early on how much primacy criminal thinking takes (pp.57-62).

As an Adlerian, I believe the first step in the treatment of offenders is gaining insight related to their lifestyle and early child experiences. Early memory client generated metaphors can be valuable tools in psychotherapy as they relate to current psychotherapeutic issues (Kopp, & Eckstein, 2004). Beginning work around their own personal trauma and their early child experiences including abuse: physical, emotional, sexual or neglect. Then begin to connect the feelings that came from those early experiences and how it was carried on into their own offending cycle is the next crucial step. It is important as the client begins to connect and gain insight that they begin to identify and discuss their perpetrator crimes, stop blaming, and take responsibility for their actions and begin to hopefully feel remorse and empathy for their victims.
Addressing thinking errors or mistaken beliefs, and putting into practice healthy ways of expressing thoughts, beliefs, and anger.

In working with violent/sexual offenders, there are currently psychological tests that have been considered able to predict violence potential such as the Buss Dunkee Hostility Inventory (BDHI) and the psychopathic deviation scale from, as well as the Minnesota multiphasic personality inventory or MMPI. Other types of clinical evaluations include psychometric workup, clinical interviews, and formal written psychological reports; which are noted to be very expensive and not always possible to manage in view of the new offenders entering prisons. However, practitioners are often up against the difficulty in differentiating true remorse for previous and current behavior as prisoners have learned to manipulate by expressing false guilty feelings and false empathy in order to gain privileges. One of the projective or expressive drawings that has been used is: the draw a person (DAP) test. It is based on the assumption that the drawn figure is actually the client and the paper represents the subject's environment. Machover (1949) developed the DAP test; a human figure drawing which frequently provides evidence of the impulses, traits, anxieties, conflicts, and compensations characteristic of an individual.

In one study that was done the study consisted of 60 male prisoners according to their history of violent behavior. The average age was 32. The first group consisted of 20 murders and violent robbers who were recognized among the prisoners as violent individuals. The second group consisted of 20 domestic violence offenders; and the third group of 20 served as a control group, which consisted of prisoners who had no previous records regarding violent behavior. Each client that was in the study was given a sheet of paper or pencil and eraser and asked to draw a human figure these were the only instructions that were given.
There were 12 indicators that had been selected for comparison.

A. Eyes: hollowed, diagonal, shadowed, piercing, or omitted.
   B. Eyebrows: Thick and shaded.
   C. Moustache and beard: shadowed and thick.
   D. Neck: disconnection of either neck to either the face line or the shoulders.
   E. Nostrils: evident
   F. Mouth: exposed teeth
   G. Face line: double or distorted.
   H. Shoulders: Broad
   I. Ears: emphasized, double, or omitted.
   J. Hands: covered, cut off, or shadowed.
   K. Arms: Shadowed, large or disconnected from shoulders.
   L. Fingers: Large, stick, pointed, spike like, or talon fingers
   M. Stance: a fierce posture, stable and strong (Hershkovitz & Lev-Wiesel, 2000).

An analysis to compare the measures of indicators in each group was conducted. There were clear indicators distinguishing significantly between violent offenders and nonviolent offenders. This is a small example of why this writer plans to do further research in the future.

Art therapy assessment tools give the practitioner insight that the client is not even aware that is being given.

The Art Therapist: Promoting Insight and Change

This paper would not be complete if this writer did not include Sean McNiff’s (1988) comparison of the art therapist to a shaman. The shaman starts a special life by going on his own painful journey. Along this journey he faces the monsters and demons and evils of the world.
The shaman learns to live with the motives, forces, and conflicts in the world that many other people in the world would attempt to devalue or disown. It's the power from the healing that occurs for the shaman that encourages his/her willingness to go with others on their journey. As a Christian, it has been my belief that, like the sometimes-painful journey of the Shaman; God has allowed this writer to face many challenges in life as part of his plan and as a way of preparing this writer to help others.

Art Therapy has evolved from the early psychoanalysts use of free association as a way to look for themes and messages that would give them insight to the into the unconscious areas of their clients mind (McNiff, 1988) to using artistic expression as an alternative vehicle for a dialogue between the client and the therapist. As well as being an additional method for gaining information from a client who is unable to speak, or when it is just too painful for the client to verbally express. In clients who have been victimized in some way, artistic expression may be a way (a voice) that allows them to express the experience, feelings, and emotions (Backos & Pagon, 1999).

In the early stages of using art therapy with a client, this writer tries to offer clients new ways to express their feelings simply by identifying a feeling as a color, as well as through the use of shapes, and lines. Collage is useful with reducing the anxiety level that is related to artistic performance. Collage also has the tendency to reduce defenses. In forensic clients they are allowed to use pictures of guns, police jail, as well as precut words to express their experiences. It frequently feels less threatening to express themselves through the art and it offers a way of containment.

As an art therapist this writer believes that there are prominent rationales for using art therapy. It allows clients to communicate in a symbolic way that cannot be verbalized. In
addition often the clients’ artwork reveals content behind the image, which are often fragmented thoughts and conflicts. In order for a client to begin to explore and express himself through the use of art mediums there has to be a sense of trust between the client and the therapist. Artistic expression of emotions instead of acting out aggressive behavior can serve as a useful coping mechanism. This writer has found that painting provides a medium that is flowing, it allows for movement, and can be useful as an outlet for the release of different emotions. It provides a safe vehicle to express anger without hurting anyone. It also is an example of how it allows clients to express emotional polarities in art, and assist with gaining insight into inner conflict with denial. It allows the client to work through early childhood experiences while examining and making connections between their thoughts and feelings related to being the victim and a perpetrator. Goals in therapy with Forensic clients are geared toward encouraging self expression, self esteem, coping mechanisms, social skills, breaking through defenses, encourage openness to their offenses, provide insight around thoughts that triggered the offense, encourage self control, learn alternative behaviors and develop empathy for the victim (Smeijsters & Cleven, 2006). One art experiential that this writer feels would be a good assessment tool in assessing anger as well as for encouraging emotion regulation; is the use of watercolors on a wet piece of paper. Watercolor is a medium that does not allow for the control that other art mediums allow. As an Art therapist, providing this experiential would allow for both the client and the art therapist to observe and discuss the feelings the client has in working with an art medium that does not allow the control the he may desire. It also offers the client with an opportunity to experience less control over the medium at the same time experience a sense of freedom if he is able to lower his defenses and allow himself to enjoy the process.
Conclusion

In conclusion, while there have been many thoughts in history about violence and the solution being punishment and imprisonment. As well as other thoughts that are based on value judgments, “that a person is just a bad person.” As an Adlerian therapist, those thoughts are no longer good enough. As this writer began doing research on people who are in correctional facilities for different reasons, one of the common themes that this writer came across was that the majority if not all of those incarcerated had been victimized themselves in early childhood.

What this writer also found is that the topic of psychopathology and understanding and working with sexual offenders is much more in depth than I could begin to neither imagine nor cover in this thesis. However this writer recognizes that as a therapist working with this population the understanding of the criminal mind and how it functions is a must, to avoid Naiveté in providing treatment. Defense mechanisms have been in place in order to “avoid” feeling. In therapy in order to promote change we encourage our clients to allow themselves to feel, the very thing that Sexual offenders have avoided. First the feelings that comes from their own victimization, than the ones where they have been the perpetrator. But this writer strongly believes that this is what it takes to connect the pieces of the circle of violence.

In order to gain this insight this writer believes that the lifestyle analysis and a combination of art therapy will beneficial In encouraging insight, connecting, providing alterative methods of expressing painful thoughts and feelings. For the most part, I don’t believe that people are bad people, I believe that they are people who had a bad start in life. I also believe that that they are accountable for the choices that they make in life. Early childhood experiences are not necessarily by choice. But learning how they have affected your life and the people that you effect, is a choice. This writer believes that her ex husband knew what he was
doing was wrong. Even when confronted, he chose not to look at his behavior and the harm that he was causing, because it was easier to do that than it was to admit that what he was doing was wrong, and to simply blame others for his anger.

I am grateful for the experience and the deeper knowledge that I have gained from researching and writing it this thesis. Yet I feel that there is much more research to be done. I hope to look further at the use of Art therapy as an assessment tool in my future research.
References


