

The Body Image in the Drawings of Children Diagnosed with Autism

Veronika Ivanova*

Department of Psychiatry and Medical Psychology, Medical University- Varna, Bulgaria

ABSTRACT

The specifics of sensory perception and the perception of the own body in children with autism is the basis of understanding the difficulties in their cognitive and social development. On the other hand, drawing is a method of examination with a therapeutic effect and minimizes harm and anxiety from a standard psychological study. This article aims to explore the issues related to body image and its use in clinical diagnosis and therapeutic practice with children diagnosed with autism. Following the principle of quality methods of clinical diagnosis, this work attempts to present the place of the body, the internal image of the body in working with the autistic child and how it presents it to us in its drawings during sessions with the psychologist. The drawings of 60 children diagnosed with autism aged 3 to 6 years were examined.

Methods used: the method of free drawing, clinical observation.

Results: When examining the drawings of children diagnosed with autism, certain specifics and trends were taken into account that allows their partial structuring and analysis, compared in the group of autistic children. Due to the specificity and strong heterogeneity of the condition, it is not recommended to do such research in comparative analysis with control groups of healthy children.

Conclusions: Some common points are drawn, such as identification with individual objects, such as road signs, figures, dismemberment of the inner body image, drawing of the figures circled by the outside world with a circle or square, etc. The goal is delicate and respectful of the autistic protections of the child, to attempt to understand the inner image of the body and the pathways for therapeutic work.

KEYWORDS: Autism; Drawings; Body image

INTRODUCTION

The interest in this topic is related to several years of clinical observation of children diagnosed with autism and the body image they create in their drawings, in the midst of therapeutic interaction with the psychotherapist. In an attempt to systematize these drawings and look for common trends to support practical work, this study is presented [1], claims that in order to redeem a child, it must give meaning to his life, adults must give the meaning of life, even though the meaning hidden in a particular drawing, born in a fantasy of encounter between the therapist and the child [2]. This feeling is necessary for the individual if he wants to remain satisfied with himself and of what he does, in the case of the drawing created. Giving meaning to the child is the main task of the child psychotherapist according to [2], who explores the methods inherent in the life of the child to help him find his motives for existence and give maximum meaning to his life. The theoretical article draws on a psychoanalytic tradition in

understanding autism, ideas from [2,3] in an attempt to understand the subjectivity of the child with autism.

From a psychoanalytic point of view, the evaluations of children with autism have remained descriptive and have focused on the psychodynamic coherence of the symptoms grouped in syndromes and on the withdrawal from drive life and emotional relationships. The first stages of the psychic development of the body are severely disturbed by the autistic pathology, leading to primitive anxieties. These anxieties are related to the fragile development of the body-ego. According to the psychoanalytic approach, the overwhelming and disorganizing child of autism is due to the fragility of the first ego construction. Only in this way will it be possible to deal with the body-related anxieties and allow the recognition of emotions and the presence of others.

The major cases of autistic children were generally presented by the school Anglo-Saxon, cases that were later read by the authors of Lacanian orientation with the concepts of these theories. The

*Correspondence to: Dr. Veronika Ivanova, Department of Psychiatry and Medical Psychology, Medical University-Varna, Bulgaria, E-mail: veronika_ivanovi@abv.bg

Received: March 30, 2021; Accepted: August 17, 2021; Published: August 24, 2021

Citation: Ivanova V (2021) The Body Image in the Drawings of Children Diagnosed with Autism. Autism Open Access. S2:001. DOI: 10.35248/2165-7890.21.S2.001

Copyright: © 2021 Veronika I. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

developments of Margaret Mahler, Frances Tustin [3] and Bruno Bettelheim [4] are a reference to which analysts often turn to question autism. Following Lacan and his concept of language: central concept in Lacan's last teaching. Beginning with "O Pire", Lacan will distinguish language from the *lalangue*. This implies a transformation of the symbolic as a register, as the *lalangue* introduces a real aspect of the signifier. The signifier now introduces a deregulation in the body, and through language a regulation of *jouissance* is proposed to capture what escapes, what ceaselessly escapes as nonsense. Language does not chain itself together, but presents itself as a signifying swarm. Following the developments of Jacques Lacan and J. A. Miller, we will consider "trauma" as an encounter of the living being with the *lalangue*. We could say that the traumatic event common to all human beings is the encounter with *lalangue*, from which remain fixations, traces that may or may not be rewritten into signifiers. Miller says that "the true traumatic core is the relation to language"; and that "for the human animal to have a relation to language is to go mad". He adds that the *lalangue* disorganizes the body, and that the subject must extinguish this pleasure which invades the living being. We will use the name body for the effect that the trauma of the tongue has on the living being, introducing an unprecedented deregulation for the organism. The living being that is disturbed by the tongue is necessarily lost as an organism and becomes a body that is parasitized by the marks left by the encounter with the tongue. It is thus a consequence of the trauma and may or may not become an imaginary body, as a result of the interweaving of the imaginary, the symbolic and the real. We will call this first body "memory body". Rosine Lefort argues that in autistic people the body of the other is not pierced, and that for this reason the body of the child is pierced in reality. She argues that in the first stage of subjective constitution, the child's body need not appear pierced, but that it is the Other's body that must be: If the hole is not in the Other's body, it returns to the child's body as a real hole. They will resort to topology to think about the status of the body, and they will find in the structure of the Moebius strip the topological figure that allows them to explain a non-perforated and non-oriented surface [4].

MATERIALS AND METHODS

120 children between the ages of 3 and 9 were studied. The children were given a white sheet, pencils, and a children's drawing table, and the investigator asked them to draw a person. The children were examined using CARS 2.

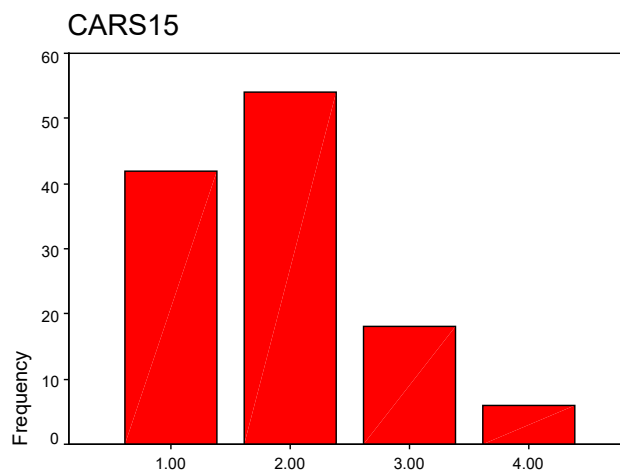
Clinical Method

Includes observation, direct work with the child on the individual issues of the methodology used, conversation with parents, and diagnostic discussion with the clinical team.

Psych diagnostic method: includes examination of children with mental developmental stairs, assessment of cognitive, communicative, socio-emotional and sensorimotor functions. CARS 2 Childhood Autism Rating Scale | Second Edition Statistical method: involves data processing using the SPSS program. For data analysis we use descriptive statistics, correlation analysis, and a frequency distribution of data.

RESULTS

Provided on Chart 1 is descriptive statistics on the severity of autistic symptoms obtained in CARS 2 (CARS 15- summary):



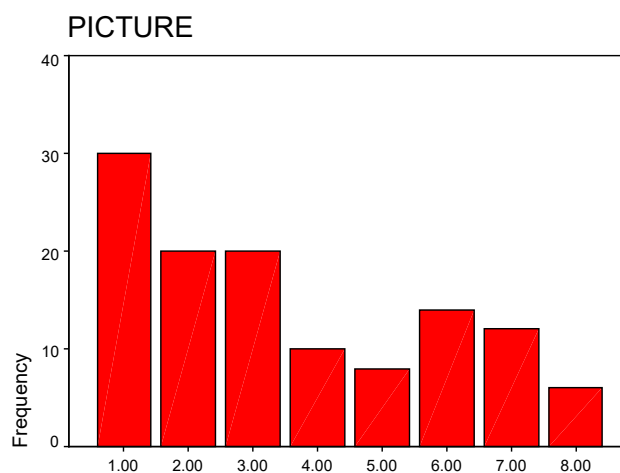
CARS15

1-mild degree, 2-moderate degree, 3- severe, 4-very heavy

Children's drawings are structured and analysed in several categories presented in Chart 2:

Categories

1. Embryonic-circles, water, amoeba
2. Colour spots that cover the human figure or depict a human figure without external borders
3. Figures and letters
4. Human figures fenced as a bubble, a human figure composed with parts of objects body parts (the elements are not connected)
5. Geometric shapes objects (buildings, streets with marking, residential blocks, strange shells)
6. Road signs, logos



PICTURE

The results show that we have the most drawings in the first category (circles, embryonic, water) followed by second and third categories, namely colourful spots, numbers and letters. At least the drawings of whole human figures, in parts in which the elements are or are not connected between themselves or replaced by an unfair subject (Tables 1 and 2).

From the results it appears that in children with mild and moderate disorder all types of drawings occur, except for category 5 drawings,

Table 1: The relationship between the severity of symptoms and types of drawings table was investigated, and in our case, it was negative, which means there is no or even retreated between the weight of autistic symptoms and the types of drawings that children draw.

		Correlations	
		CARS 15	PICTURE
CARS 15	Pearson Correlation	1	-0.193
	Sig. (2-tailed)	.	0.035
	N	120	120
PICTURE	Pearson Correlation	-0.193	1
	Sig. (2-tailed)	0.035	.
	N	120	120

*Correlation is significant at the 0.05 Level (2-tailed)

Table 2: presents the distribution of types of drawings, according to the categories of autistic symptoms.

		PICTURE *CARS 15 Cross tabulation				
		CARS15				Total
Count		1.00	2.00	3.00	4.00	
Picture	1.00	4	16	8	2	30
	2.00	8	6	6		20
	3.00	10	6	2	2	20
	4.00	6	4			10
	5.00	2	6			8
	6.00	6	4	2	2	14
	7.00	4	8			12
	8.00	2	4			6
Total		42	54	18	6	120

which are found only in children with moderate autistic disorder. In children with severe and very severe degree, embryonic drawings and circles, water, colour spots and occasionally other categories predominate.

DISCUSSION

From the results presented, how often the unconscious body image at autistic children is connected to non-living objects and for the most part is partial, torn. In the drawings in which there is a human figure, it is surrounded in a "protected circle", which associatively reminds of the womb and could be an expression of safety and security demand, which is recognized as a basic need and patients with psychosis and in some of the autistic children. Another big group is these drawings, in style impressionism, where images and figures are fuzzy, there are no clear limits between me and others [5] and associates describe their observations on the lack of clear distinction between "inside and outside" between real, symbolic and imaginary [6] in children with autism.

From the results, it is seen that there is no statistical dependence between the severity level of autistic symptom and the types of drawings. Children with autism, significantly less often than other children draw whole human figures, if available they are in pieces, i.e. the parts are not connected or any of the parts is subject. Based on the hypothesis set by psychoanalyst studying children with autism, we can assume, for lack of integrity in the notion of their own body, present a body in need of the protection of the embryonic drawing of a circle or water that is enveloped [7]. Unfortunately, the warning of psychoanalysts that it is dangerous to interpret and analyse children's drawings, often roughly overlooked by children working with children. "The child's drawing is extremely instructive for the psychotherapist. It has long been known that there is its unconscious production. But, but, but - the children's drawings

should never interpret! We must prompt the child to talk about and around them, pass through the word. "It is very dangerous to make interpretations of children's drawings because these are arbitrary, barbaric interpretations. And they have to go through the words. So when you make such an explanatory drawing, we ask the child: "If you were in her, where would you be put?" And once it is positioned somewhere, we will ask him: "Where will you put me the very man?" Then we can talk about some dynamic interpretation [8]. Children's drawings depend on what they mean, not what they see in front of them [9]. Typically in clinical work with autistic children, even when they are verbal, they do not name their drawings and a less than enthusiastic about the imaginative exploration of their works.

In children's drawings, we can assume the image of the self and perceiving of the body image. Daniel Stern puts in the centre of early children's experiences, the feeling of the emerging me and the feeling of the other. In children's drawings, we can assume the image of the self and perceiving the image of the body. Daniel Stern puts in the centre of early children's experiences, the feeling of the emerging me and the feeling of the other. The Winnick is meeting Tutar. "Transitional stage" corresponding to this period of an emerging self and image for self, events that fall at an early point from the developmental lineage, including transitional objects that occur at a later chronological age in autistic children [10].

According to [11], he describes how the early containing function she called "skin" is interjected. When this fails, only a surface identity is possible, which she called "adhesive identity"; children with autism seem to be massively fixed at a point where this adhesive identity is pathological. Meltzer [12] has two main theoretical concerns that we can relate to the findings in this text: first, it is about the defence mechanisms prevalent in autism, or the "dismantling" of the perceptual apparatus into its components of

sensoryity and sensory perception. Meltzer relates this disassembly to coercive mechanisms in general. His second major theoretical insight concerns the various spatial features of the mental apparatus and their corresponding temporal dimensions. According to [12], autistic children have a particular sense of aesthetic emotion that can overwhelm them very quickly.

Some of the resulting concepts are commonly used in work with children who are not on the autistic spectrum - such as the dimensionality of mental functioning, mental space and glue identification [12]. Frances Tustin's work on autism attempts to [13-16].

CONCLUSION

From the results presented, we can make a few conclusions about the way the child with autism perceives its own body, seeing that, in a mild and moderate degree of autism, CARS 2 rated the whole variety of categories of drawings while these With a severe and very severe degree of expressing of the disorder, circles, colourful spots, with vague boundaries predominate. Children with autism are often identified with non-living objects, road signs, eccentric houses-towers, which closes from a highly worried and too sensor overloading world. In most of the drawings, there is no other who is vital to allow the child to compare themselves to him and see in his view.

Although there are hundreds of models for the interpretation of children's drawings, the delicate area of the unconscious enter only with the permission and much of the interpretations, the psychotherapist retains for itself. The present study collects the drawings of autistic children, showing the way the child perceives its own body and interpretations are hypothetical and practically impossible for many of non-verbal children.

REFERENCES

1. Bruno B. The Empty Fortress: Infantile Autism and the Birth of the Self. The Free Press New York 1967.
2. Dolto. Nesaznavaniq obraz na tqlogo Zentar za psihosozialna podkrepa. Sofiq 2017.
3. Laznik M Hacia el habla. Tres niños autistas en psicoanálisis. Nueva Visión Bs As 1997.
4. Lefort R. Nacimiento del Otro. Paidos. Barcelona 1995.
5. Melzer. Prouchvaniq na autizma Zentar za psihosozialna podkrepa, Balgarsko prostranstvo za psihoanaliza. Sofiq 2019.
6. Lakan J. Semeinite kompleksi. izd. Siela. Sofiq 2008.
7. Basso M. Una aproximación psicoanalítica al Autismo. Ed. Letra Viva. Bue-nos Aires. 2013;12(7):24.
8. Delarosh. Ot ljubovta kam drugiq do ljubovta kam sebe si. Zentar za psihosozialna podkrepa. Sofiq 2018.
9. Dubovski & Evans. Otvad dumite. Artterapiq s deza ot autistichniq spektar. Zentar za psihosozialna podkrepa. Sofiq 2014.
10. Winnicott D. Playing and Reality (Penguin).1971;163.
11. Bruno B. The Empty Fortress: Infantile Autism and the Birth of the Self. The Free Press New York 1967.
12. Melzer. Prouchvaniq na autizma. Zentar za psihosozialna podkrepa, Balgarsko prostranstvo za psihoanaliza. Sofiq 2019.
13. Tendlarz S. De qué sufren los niños? La psicosis en la infancia. Lugar editorial Buenos Aires 1996.
14. Baron-Cohen S. Theory of mind in normal development and autism. Prisme 2001; 31: 174-183.
15. Lefort R. Nacimiento del Otro. Paidos Barcelona 1995.
16. Frith U. Autism: Explaining the Enigma. Oxford: Basil Blackwell 1991.