Psychoenergetic Drawing: A Proposal for the Elaboration of Traumatic Events With Analysis of the Depth, Body Therapy and Imaginary

Marialfonsa Fontana Sartorio
The Association Quality and Formation, The Italian Society for the Psychotherapy of Stress and Trauma,
Psychoenergetic Drawing®, Milan, Italy

Psychoenergetic Drawing® combines the double vital aspects of activity and psychic life in the therapeutic practice. It is given prominence to the unique and personal aspect of the psychotherapeutic work of each patient, of which he/she only unconsciously knows project and finality, aiming to activate psychic resources and trust in the experience of the self, also in negative or hopeless contexts. It is important that therapist can read patient’s energetic expressive signals, in which unconscious impulses are manifested, which contain both aspects removed of his past and impulses for realizing patient’s future development. So, psychic complex loses its blocking power and psychic energy finds again his flow. Patient becomes conscious of his own emotional world that he sees expressed on the sheet with the colors he has chosen, taking conscience of his psychic world. Self becomes wealthy and regains strength in the comparison, to him suitable, with the unconscious contents: So, individual psychic, bodily and social sphere are influenced. Psychotherapist has to work on the aware level and the unconscious one and must take in charge the dynamics of the personal history of the patient, the events and the consequences that it has brought to all of his psychic structure.

Keywords: Psychoenergetic Drawing®, activity and psychic life, patient’s energetic expressive signals, psychic energy’s flow

Introduction and Purpose

The problem in the trauma therapy is complex, because we have to approach a psychic situation, in which it is necessary to face excessive and inadequate defences together with pathological compensatory behaviour schemes unconsciously structured by the patient in order to get away from the comparison with the nucleus of overwhelming and negative emotions connected to the traumatic experience.

We have to deal with a patient asking for help, a request coming from his/her conscious that wants to be healthy and, moreover, we have to face with the strong resistance of the whole psychic system that fears the comparison with the traumatic complex. The therapist has to work at different levels (the aware level and the unconscious level) and must take in charge the dynamics of the personal history of the patient, the traumatic event and the consequences that it has brought to all of his/her psychic structure. Moreover, the therapist has
always to keep in mind the big difficulties or temporary impossibility of the patient to confront himself/herself with all that is connected to the traumatic event. As we know from neuroscience, this difficulty also has a neurological basis, as our memory depends on a good connection between amygdala and hippocampus, which is altered by the traumatic event.

Psychoenergetic Drawing® deals with all these difficulties which are presented in the therapy of trauma.

**Methodology**

Psychoenergetic Drawing® balances the analytical formulation and the work with image, drawing and body seen as energy.

The concepts of energy, energetic signal and resonance are fundamental. In fact, the flow of energy which pervades the psyche can stop in the psychic complex, causing symptoms and pathology.

A complex is a whole of images and ideas, gathered around a nucleus deriving from one or more archetypes and characterized by a commune affective tonality. When the complexes become active, they influence the behaviour. Moreover, according to Jung (1934), they are rooted in the body and somatically expressed. They are anchored to the past, but they also contain the future possibilities to overcome the same complex.

Using all the bodily manifestations (hand drawing, attitudes, words and images), Psychoenergetic Drawing® helps the patient express the psychic energy in him/her. The role of the therapist, who is every moment in resonance with the patient’s affections, is to stand near him in the elaboration of the complex that conditions him/her that nothing is anticipated and he does not stay tied up to his past, but therapist and patient walk together in resonance with the patient’s whole emotional world, without anticipating what cannot be anticipated.

The patient’s going on, accompanied by the therapist, is articulated by the “energetic signals” that are emotional pregnant moments in which the flow of energy is stopped, anchored to the dynamics of the past, but that also contains the resolutions projected to future.

It is important, therefore, that the therapist has the sensibility to feel and recognize the energetic signals in the expressive flow of the patient and attitude that needs a long and complex training of personal sensitisation and technical maturation.

The analytical interpretation happens only in a second time in order to avoid a precocious mentalization that would hampers the process of emotional development.

All these theoretical presuppositions belong to Psychoenergetic Drawing® which contacts the whole emotional world of the patient, in the moment that he/she uses words, pictures and drawing (in fact drawing involves the body).

When the therapist recognizes an energetic signal in the communication of the patient, he/she invites the patient to assemble on the predominant emotion and let it flow on the paper sheet, through the unconscious movements of his/her hand and the colour or the colours that he/she feels proper at that time in an almost sub-vigilant state. That means that the patient chooses for expressing himself/herself, such as wax crayons, pencils or finger paint, are important and they have different meanings.

Subsequently, the patient is invited to express the feelings that the drawing arouses in him/her with the observation of its spatial components (up and down, left and right).

The interventions of the therapist are very important, as they accompany the flow of the emotions and the memories, interacting with the patient as “companion”, always staying in resonance with the emotions that
pervades him/her.

A greater involvement of the body is possible, bringing the emergent emotions to the various parts of the
body with self-touching. It is very important to inform the patient about the modalities of Psychoenergetic
drawing® before.

It is also possible to bring back to the sensations of the body the feelings that emerge from the elaboration
of colours and drawing. The following session serves for the analytical elaboration of the emerged materials
which are the emotional experience integrating with the self.

This therapeutic method does not force the patient to precocious insights and it is very useful for the elaboration of traumas, where very strong emotional positions are presented.

This method is also useful with frail patients, because the contact between patient and therapist is constant
during the whole process, so that it is possible to elaborate very strong psychic contents.

Results

Psychoenergetic drawing® integrates the analytical depth intervention with the bodily and emotional
experience of the patient.

It is also very suitable in the elaboration of trauma, where the direct bodily approach often evokes, and in a
sudden way, all feelings and emotions tied up to the trauma. In fact, in the elaboration of the traumatic complex
where the emotional load is strong, the reactivation of the experience connected to it can afflict the patient
again, if it is evoked in a hasty way.

The patient draws on the space delimited of the sheet of paper, so he/she is contained in the contact with
his emotions.

Psychoenergetic drawing® can be propaedeutic for the confront therapy with the trauma, giving a sort of
“soft approach” to the elaboration of the nucleus of the traumatic material that will subsequently be elaborated
with the confront therapy.

Since the patient may keep the eyes open during the elaboration of the imaginary in psychoenergetic
drawing, the therapist is constantly in contact with the patient. The therapist can gradually solicit the vigilance
in the patient, according to the intensity of the emerging emotional contents. In that way, the therapist is able to
keep in contact with the patient and intervene every moment in the management of the emotions tied up to the
imaginary.

The intervention through psychoenergetic drawing that follows the flow of energetic signals can be
integrated with guided interventions on the imaginary, for example, when it is necessary to introduce a specific
elaboration of determined symbols, according to encoded specific images (meadow, sea, mountain, flower and
so on). It is so possible to establish a fruitful connection between emotional contents that spring from personal
experiences with contents coming from archetypical images.

As psychoenergetic drawing can be connected to the elaboration of bodily contents through self-touching,
in this way, our body which carries the emotion of all of our past experiences directly comes connected with the
emotional experience of the image.

Conclusions

Psychoenergetic drawing® is a very useful tool for the elaboration of traumatic contains, also in the
context of the confront therapy. It is also applicable to very frail patients, as the presence and the support of the
therapist are constant and it allows the gradual elaboration of psychic contents. It is extremely flexible and, therefore, it can be integrated with other methodologies without requiring particular instruments or specific logistic structures. It allows calibrating the interventions on the imaginary, in the respect of the process and the personal transformation times of every patient, according to the analytical elaboration.

References