Art Therapy and Runaway Homeless Youth: An Exploration of Trauma and The Survival Response of "Flight"

LeAnn K. Marschall
*Loyola Marymount University, leannemarschall@gmail.com*

Follow this and additional works at: [https://digitalcommons.lmu.edu/etd](https://digitalcommons.lmu.edu/etd)

Part of the Art Therapy Commons, and the Marriage and Family Therapy and Counseling Commons

**Recommended Citation**
[https://digitalcommons.lmu.edu/etd/59](https://digitalcommons.lmu.edu/etd/59)

This Research Projects is brought to you for free and open access by Digital Commons @ Loyola Marymount University and Loyola Law School. It has been accepted for inclusion in LMU/LLS Theses and Dissertations by an authorized administrator of Digital Commons@Loyola Marymount University and Loyola Law School. For more information, please contact digitalcommons@lmu.edu.
ART THERAPY AND RUNAWAY HOMELESS YOUTH: AN EXPLORATION OF TRAUMA AND THE SURVIVAL RESPONSE OF “FLIGHT”

by

LeAnn K. Marschall

A research paper presented to the

FACULTY OF THE DEPARTMENT OF
MARITAL AND FAMILY THERAPY
LOYOLA MARYMOUNT UNIVERSITY, LOS ANGELES

In partial fulfillment of the
requirements for the degree
MASTER OF ARTS

May, 2014
Author’s Signature:

LeAnn K. Marschall

Research Project Advisor:

Paige Asawa, Ph.D., M.F.T., A.T.R.-B.C.
Abstract

This qualitative case study examined the influencing factors of runaway behavior, trauma, and the survival response of “flight.” The participant, an 18-year-old male residing at a transitional living program, ran away at age 17 and experienced a significant trauma history. Throughout the course of treatment, artwork and clinical notes were used as data. Many themes surfaced in the analysis process, including controlled chaos, body fragmentation, sun symbols, female imagery, and lack of color. The act of running away emerged subtly, whereas, traumatic experiences, chronic in nature and beginning early in life, were acutely evident. While the study was specifically concerned with the “flight” response, due to the age of the client when the traumatic events began, the “freeze” response was more prevalent in his artwork. This suggested that further research with this population may reveal the thread that connects these two survival responses and specifically when the “freeze” response shifts to a “flight” response related to running away behavior.
Disclaimer

This paper is based on an independent study resulting from the researcher’s review of the literature. This paper does not reflect the views of Loyola Marymount University, nor the Department of Marital and Family Therapy. This research is based upon a single case study. The name of the participant in this study has been changed to maintain confidentiality.
Dedication

This research study is dedicated to my research participant and to all the youth I crossed paths with during my practicum training. You taught me greatly.
Acknowledgements

Despite the longevity of this research journey, I remained inspired, motivated, and committed throughout. I would like to acknowledge several people whose influence created an environment for me to grow beyond my own expectations. I would like to extend a special thank you to my research mentor, Dr. Paige Asawa, whose energy, enthusiasm, and positivity was infectious. Another special thank you goes to my research cluster whose consistent presence created a calming and grounding experience each week. And, finally, I am grateful to be blessed with someone in my life who is supportive beyond words, cooks better meals than Bobby Flay, and possesses eyes like an eagle’s.
Table of Contents

Signature Page ................................................................................................................................. 2
Abstract ........................................................................................................................................... 3
Disclaimer ....................................................................................................................................... 4
Dedication ....................................................................................................................................... 5
Acknowledgements ........................................................................................................................ 6
Table of Contents ........................................................................................................................... 7

I. INTRODUCTION ................................................................................................................ 9–10
   The Study Topic ......................................................................................................................... 9
   The Significance of the Study ..................................................................................................... 9

II. BACKGROUND OF THE STUDY TOPIC ................................................................... 11–12

III. LITERATURE REVIEW ................................................................................................. 13–45
   Introduction ................................................................................................................................. 13
   Prevalence and Incidence Rates of Runaway Homeless Youth .................................................. 14
   Definitions and Types of Runaways ........................................................................................... 15
   Implications for Runaway Homeless Youth ................................................................................ 18
       Stress, Depression, and Suicidality ......................................................................................... 18
       High-Risk Sexual Activity ....................................................................................................... 20
       Substance-Use .......................................................................................................................... 21
       Crime ...................................................................................................................................... 21
       Educational Challenges ........................................................................................................... 23
   Positive Outcomes ...................................................................................................................... 25
   Runaway Homeless Youth and Exposure to Trauma ................................................................. 26
       Trauma as Catalyst to Runaway Behavior .............................................................................. 27
       Cycle of Trauma ..................................................................................................................... 30
       Pervasive Trauma .................................................................................................................. 34
   Stress Response and Trauma ...................................................................................................... 35
       Human Stress Response ........................................................................................................... 36
       The Origins of Posttraumatic Stress Disorder ......................................................................... 36
       Posttraumatic Stress Disorder and Runaway Homeless Youth ............................................... 38
       Ongoing Traumatic Stress Response ..................................................................................... 40
   Art Therapy and Runaway Homeless Youth .............................................................................. 41
   Conclusion .................................................................................................................................. 44
<table>
<thead>
<tr>
<th>Table</th>
<th>Title</th>
</tr>
</thead>
<tbody>
<tr>
<td>IV.</td>
<td>RESEARCH APPROACH ........................................................................</td>
</tr>
<tr>
<td>V.</td>
<td>METHODS ..........................................................................................</td>
</tr>
<tr>
<td></td>
<td>Introduction ..................................................................................</td>
</tr>
<tr>
<td></td>
<td>Definition of Terms .......................................................................</td>
</tr>
<tr>
<td></td>
<td>Design of Study ............................................................................</td>
</tr>
<tr>
<td></td>
<td>Sampling .......................................................................................</td>
</tr>
<tr>
<td></td>
<td>Gathering of Data .........................................................................</td>
</tr>
<tr>
<td></td>
<td>Analysis of Data ..........................................................................</td>
</tr>
<tr>
<td>VI.</td>
<td>RESULTS ...........................................................................................</td>
</tr>
<tr>
<td></td>
<td>Presentation of Data .....................................................................</td>
</tr>
<tr>
<td></td>
<td>Introduction ................................................................................</td>
</tr>
<tr>
<td></td>
<td>Identifying Information ................................................................</td>
</tr>
<tr>
<td></td>
<td>Presenting Problem ......................................................................</td>
</tr>
<tr>
<td></td>
<td>Family History ..............................................................................</td>
</tr>
<tr>
<td></td>
<td>Medical and Psychiatric History ................................................</td>
</tr>
<tr>
<td></td>
<td>Mental Status Exam ......................................................................</td>
</tr>
<tr>
<td></td>
<td>DSM-IV-TR Diagnosis .....................................................................</td>
</tr>
<tr>
<td></td>
<td>Dynamic Formulation .....................................................................</td>
</tr>
<tr>
<td></td>
<td>Treatment Goals ...........................................................................</td>
</tr>
<tr>
<td></td>
<td>Treatment Plan ............................................................................</td>
</tr>
<tr>
<td></td>
<td>Presentation of Sessions 1 through 25 .......................................</td>
</tr>
<tr>
<td></td>
<td>Analysis of Data ..........................................................................</td>
</tr>
<tr>
<td></td>
<td>Introduction ................................................................................</td>
</tr>
<tr>
<td></td>
<td>Controlled Chaos .........................................................................</td>
</tr>
<tr>
<td></td>
<td>Emotional Flooding .......................................................................</td>
</tr>
<tr>
<td></td>
<td>The Color Yellow ........................................................................</td>
</tr>
<tr>
<td></td>
<td>Covered Face, Absence of Facial Features, and Fragmented Bodies ......</td>
</tr>
<tr>
<td></td>
<td>Group 1: Collage Pieces ................................................................</td>
</tr>
<tr>
<td></td>
<td>Group 2: Representational Pencil Drawings ...................................</td>
</tr>
<tr>
<td></td>
<td>Group 3: Abstract Imagery ..........................................................</td>
</tr>
<tr>
<td></td>
<td>Study Questions ............................................................................</td>
</tr>
<tr>
<td></td>
<td>Findings .......................................................................................</td>
</tr>
<tr>
<td>VII.</td>
<td>CONCLUSIONS ..................................................................................</td>
</tr>
<tr>
<td>VIII.</td>
<td>REFERENCES ....................................................................................</td>
</tr>
<tr>
<td>IX.</td>
<td>APPENDICES ...................................................................................</td>
</tr>
<tr>
<td></td>
<td>List of Figures ...............................................................................</td>
</tr>
<tr>
<td></td>
<td>Informed Consent Form ..................................................................</td>
</tr>
</tbody>
</table>
I. INTRODUCTION

The Study Topic

The purpose of this study was to investigate the “flight” survival response in relation to trauma and the act of running away. Adolescents who run away from home commonly do so to escape unbearable environments or situations. Furthermore, trauma histories tend to be significant in the runaway population. The researcher constructed several study questions to promote guidance and structure for this research: 1) How did the runaway experience surface in treatment and the art? 2) What kind of themes emerged in the imagery and content of the art? 3) Were traumatic experiences visible in the art? If so, what type of trauma and at what point in treatment did trauma emerge in the artwork? 4) Were there observations in the art, the art process, and/or behavior that was indicative of the survival response of “flight?” 5) Was there a relationship between the traumatic experiences and running away? A reflective case study was utilized as a way to examine the linkage between traumatic experiences, “flight” survival response, and runaway behavior. Art therapy was the mode of treatment for the individual highlighted in the case study.

The Significance of the Study

Although the field of general psychology had numerous studies focused on the runaway youth population and general information was not a rarity, this research was warranted because there was no research that focused on survival response and runaway behavior. Furthermore, the art therapy field had minimal research involving the runaway youth population as a whole, let alone specificity within this population. The researcher’s hope was that this reflective case study
would establish preliminary findings that would promote further exploration and research within
the runaway youth population.

This research grew out of clinical work during the researcher’s second year practicum at
a runaway homeless youth shelter. Working with this population piqued the researcher’s interest
in this topic. As the researcher began working therapeutically with adolescents who had run
away from home, she began to wonder what was underlying this runaway behavior. The
researcher recognized early on that trauma was a major theme in the lives of these youth, and
desired to gain a better conceptualization of human physiological responses to trauma. Was it
possible that the survival response of “flight” was triggered by traumatic experience and, in turn,
catalyzed runaway behavior? It was the convergence of trauma experiences, the survival
response of “flight,” and running away that grabbed the researcher’s attention.
II. BACKGROUND OF THE STUDY TOPIC

Greene et al. (2003) discovered embedded challenges in studying runaway homeless youth (RHY), including inconsistent definitions of what it meant to be homeless or a runaway, lack of standardized methodology for sampling, and an over-dependence on data from shelters. The mobility and avoidant nature of RHY also posed barriers for determining national estimates (Green et al., 2003; Link et al., 1994) and, ultimately, contributed to this population being understudied and undercounted (Green et al., 2003). Despite solid national numbers, Hagedorn (2002) and Slesnick, Meyers, Meade, and Segelken (2000) promoted that RHY embodied a growing population.

Washington (2011) described RHY as a “silent society” with limited political, legal, and healthcare options due to age, lack of financial security, level of education, and little family support. The invisibility of RHY, along with the instability of life on the street, garnered significant mental and physical health, and behavioral concerns for these youth (Clatts, Davis, Sotheran, & Atillasoy, 1998; Clements, Gleghorn, Garcia, Katz, & Marx, 1997; Ringwalt, Greene, & Robertson, 1998).

Trauma in the lives of the RHY population was highly evident and identified within the literature. What was unique about the RHY population and the trauma experienced by them was a two-pronged conceptualization: Trauma prior to running away and trauma after running away. Physical, emotional, and sexual abuse, as well as neglect, witnessing violence in the home, and substance abuse by a caregiver were all common experiences prior to running away (Thompson, Maguin, & Pollio, 2003). But as RHY left home in search of safety, street life was often marked by hunger, violence, and exploitation (Martinez, 2006). Trauma was not a secluded, one-time
event. Poly-victimization and chronic trauma was ubiquitous. Coates and McKenzie-Mohr (2010) found, on average, both males and females had faced 11 to 12 different kinds of highly stressful events, about half prior to and the other have after leaving home.

Despite the pervasive nature of trauma in the lives of RHY, very little research examined this population’s trauma symptoms, stress reactions, and survival responses. The primary framework used to conceptualize any and all types of trauma symptomology was posttraumatic stress disorder (PTSD), a DSM diagnosis that originated from the overarching notion of the “fight-or-flight” survival response. Yet very few studies examined PTSD among young people exposed to chronic and repeated traumatic events. In fact, several authors (Coates & McKenzie-Mohr, 2010; McKenzie-Mohr, Coates, & McLeod, 2012; McManus & Thompson, 2008) highlighted how PTSD diagnosis and symptoms may not be congruous for RHY who have been exposed to such pervasive trauma. Diamond, Lipsitz, and Hoffman (2013) brought to light an alternative view of the stress response activated by trauma that diverged from PTSD, called ongoing traumatic stress disorder.

Many authors agreed that more research was in dire need due to the complex and cyclical nature of trauma in the lives of RHY (Coates & McKenzie-Mohr, 2010; McCarthy & Thompson, 2010; McKenzie-Mohr et al., 2012; Sullivan & Knutson, 2000; Thompson, Cochran, & Barczyk, 2012; Whitbeck & Simons, 1990; Yoder, Bender, Thompson, Ferguson, & Haffejee). Research that pertained to art therapy and the RHY population was minimal with only three articles unearthed (Howe, Burgess, & McCormack, 1987; Kidd, 2009; Prescott, Sekendur, Bailey, & Hoshino, 2008).
III. LITERATURE REVIEW

Introduction

An overview of the prevalence and incidence rates of runaways, followed by definitions and typologies of this population, was the practical starting place for the literature review. Unexpectedly, these two sections posed complexities when a lack of clarity, due to inconsistent and overlapping concepts, arose. Throughout the literature, many terms were used to identify this population, including runaway youth, thrownaway youth, homeless youth, runaway homeless youth, and street youth. The researcher found that the term runaway homeless youth (RHY) surfaced as the most predominant term used in the literature and it also captured a fuller picture of the realities runaway youth faced. Therefore, “runaway homeless youth” was chosen as the key term to be used throughout this paper. The murkiness surrounding who runaways were, how many there were, and how to access them unfolded into the next section about the invisibility and silent nature of this population and the significant mental and physical implications these youth often encountered.

Trauma in the lives of RHY was discussed in a significant amount of literature. Not only was trauma recognized as a catalyst for running away, but also as a cyclical, chronic, and pervasive aspect of the RHY experience. This literature review appropriated sections for an in-depth examination of trauma in the lives of these youth.

As the first portion of the literature review focused on RHY and trauma, the next major portion focused on stress response and trauma. Sub-sections materialized from the literature that pertained to the human stress response, the origins of posttraumatic stress disorder, traumatic stress response, and ongoing traumatic stress response.
Finally, the literature review surveyed the limited landscape of art therapy research and the RHY population with three articles.

**Prevalence and Incidence Rates of Runaway Homeless Youth**

Pinpointing current and accurate prevalence and incidence rates of the runaway homeless youth population in the United States was difficult to locate in the literature. Rates were wide-ranging (Thompson, Bender, Windsor, Cook, & Williams, 2010; Thompson, Maguin, & Pollio, 2003; Williams, Lindsey, Kurtz, & Jarvis, 2001), which was exemplified by Farrow, Deisher, Brown, Kulig, and Kipke (1992) who estimated anywhere between 500,000 to 2 million runaway homeless youth existed in the United States. Despite the current year being 2014, the most recent numbers were from 1999 (Hammer, Finkelhor, & Sedlak, 2002). According to the Second National Incidence Studies of Missing, Abducted, Runaway, and Thrownaway Children, approximately 1.6 million youth had a runaway or throwaway episode in 1999 (Hammer et al., 2002).

Greene et al. (2003), found embedded challenges in studying runaway homeless youth that led to varying information about the size and characteristics of this population. Inconsistent definitions of what it meant to be homeless or a runaway, lack of standardized methodology for sampling, and an over-dependence on data from shelters were partly to blame (Greene et al., 2003). The mobility and avoidant nature of runaway homeless youth also posed barriers for determining national estimates (Green et al., 2003; Link et al., 1994). In fact, the term “the hidden homeless” was used in van Wormer’s (2003) article, which explained how youth floated from place to place making it difficult to spot them as being homeless. Ultimately, these were a few of the contributing factors that caused this population to be understudied and undercounted.
(Green et al., 2003). Despite solid national numbers, Baron (2003), Hagedorn (2002), and Slesnick, Meyers, Meade, and Segelken (2000) suggested that homeless runaway youth embodied a growing population.

**Definitions and Types of Runaways**

Lack of clarity regarding the term “runaway” was evident throughout the literature. The various and most popular terms used were runaway youth, thrownaway youth, homeless youth, runaway homeless youth, and street youth. Uncovering a congruent national definition of “runaway” in the United States was an arduous task. According to the National Conference of State Legislatures (2013), “many national organizations define homeless and runaway youth differently (para. 1)” and “the terms ‘homeless’ and ‘runaway’ are used interchangeably as both groups lack adequate shelter and are at a greater risk of engaging in dangerous behaviors while living on the streets” (para. 1). Glassman, Karno, and Erdem (2010), Greene et al. (2003), and Washington (2011) also concluded that terms were not well defined, indistinct, and used interchangeably. Glassman et al. (2010) highlighted that “the meanings of youth homelessness [were], in some ways, controlled by the governmental programs that deal[t] with homeless youth — in particular the Runaway and Homeless Youth Act that determine[d] the parameters for funding these programs” (p. 803) and the confusion became even more convoluted when other federal, state, and local laws were integrated into the definitions. The Runaway and Homeless Youth Act’s name alone signified an overlap between the terms “runaway” and “homeless.”

The Runaway and Homeless Youth Act (2008) defined a runaway as “an individual who [was] less than 18 years of age and who absent[ed] himself or herself from home or a place of legal residence without the permission of a parent or legal guardian” (sec. 387. definitions). The
term homeless youth was, as defined by The Runaway and Homeless Act (2008), variable on the age depending on state or local regulations and what kind of shelter youth was seeking. But essentially there were three criteria for a youth to be considered homeless: 1) The youth was under 21 years of age; 2) It was not possible for the youth to live in a safe environment with a relative; and 3) There were no other safe alternative living arrangements for the youth.

Despite the legislative definitions, such as the ones above, the definitions throughout the literature varied as researchers sought clarification from different sources. For example, van Wormer (2003) looked to the U.S. Department of Health and Human Services and found that “a runaway [was] a youth who [was] away from home without permission of his or her parents or legal guardian at least overnight” (p. 90) and “a homeless youth ha[d] no place of shelter and [was] in need of services, shelter, supervision, and care” (p. 90). And Thompson and colleagues (2010) stated that “adolescents who [left] home without parental consent [were] initially termed runaways; those who reside[d] for prolonged periods on the streets [were] typically labeled homeless” (p. 194). These were only a few examples of the subtly nuanced distinctions and versions of these two terms. Furthermore, despite the attempt to create a distinction between a “runaway youth” and a “homeless youth,” the very nature of being a runaway innately implied that the adolescent was possibly homeless. These overlapping concepts most likely explained why the term “runaway homeless youth” was utilized by many authors and was observed to be the most frequented term utilized to describe this population. As a result, it was determined by this researcher that using the term “runaway homeless youth” (RHY) for this literature review and research project was most fitting.

The definitional complexity became even more layered when additional typologies transpired from the literature. Farrow et al. (1992) conducted research that provided insights into
runaway behavior and classified runaway youths into four typologies: Situational runaways, runaways, throwaways, and systems youths. “Situational runaways” were defined as youth who had left home for a day or two after a conflict with parents but went back home after a brief time; “Runaways” were defined as youth who left home due to a conflict with parents, abuse, or neglect and stayed away for a long period of time, and tended to run away chronically; “Throwaways” were defined as youth who were forced out of the home due to parental abandonment, parents not allowing them in the home, or severe levels of abuse or neglect; “Systems youths” were defined as youth who had no recent contact with their families, living in institutions or foster care, and ran away due to the inability to endure their living arrangements, often times becoming part of the runaway culture and remain on the streets. Thompson, Safyer, and Pollio (2001) also highlighted typologies; however, it was slightly varied from Farrow et al. (1992): “Runaway-homeless youths” were defined as youth who had left home for at least a day without parental permission, “throwaway youths” were defined as youth who had been thrown out of their homes, and lastly, “independent youths” were defined as youth who did not have a home due to family conflicts or the family was homeless. “Street youth” was another common term used and, according to Baron (2003), referred to runaway or thrownaway youth who spent some or all of their time in various public locations. Despite the various endeavors to create typologies as a way to better understand this population, the overlapping nature of the terms was evident. Bradford (1995) captured the circular aspect of the definitions with this statement:

Even though the definitions clearly state that runaways run from home and throwaways are kicked out of home, in reality, the adolescent in either category is often out of the home because of a family dispute. Consequently, the parent tells the youth to leave, or the youth tells the parent he or she is leaving. The distinction between a runaway and a
throwaway becomes arbitrary. One adolescent commented, “I told my mother I was leaving before she could kick me out.” (p. 189)

Implications for Runaway Homeless Youth

Green et al. (2003) cited several authors that determined that runaway homeless youth (RHY) was a high-risk population that required urgent attention from policy makers. Washington (2011) described RHY as a “silent society” (p. 169) with limited political, legal, and healthcare options due to age, lack of financial security, level of education, and little family support. The invisibility of RHY, along with the instability of life on the street, garnered significant mental and physical health, and behavioral concerns for these youth (Clatts, Davis, Sotheran, & Atillasoy, 1998; Clements, Gleghorn, Garcia, Katz, & Marx, 1997; Ringwalt, Greene, & Robertson, 1998). Limited access to shelter, exposure to the street environment, interrupted sleeping patterns, mal-nutrition, and physical and psychological trauma contributed to medical and emotional problems for RHY (Busen & Beech, 1997). The most prominent themes throughout the literature were: 1) Stress, depression, and suicidality; 2) High-risk sexual activity; 3) Substance-use; 4) Crime; and 5) Educational difficulties. The majority of the literature focused on the above-mentioned negative consequences associated with running away; however, some literature existed that focused on positive outcomes for these adolescents, such as improved quality of life and personal strength to adapt.

Stress, Depression, and Suicidality

Many studies confirmed that the mental wellbeing of the RHY population was of great concern. Whitbeck, Hoyt, and Bao (2000) stated:
Running away is in itself a major source of stress for young people. Leaving even a disorganized family and losing familiar routines of school and home is extremely disruptive for young lives. Time spent on the streets or shelters presents novel situations that are associated with vulnerability, unfamiliar and threatening surroundings, hunger, and new, often unpredictable associates. (p. 722)

Thompson and colleagues (2010) cited many authors who described life on the street. Each author contributed a significant perspective that provided an overview of the emotional distress and increased psychological symptoms that RHY may present in treatment. It was noted that these adolescents exhibited symptoms that aligned with anxiety, attention deficit disorder, and developmental delays. Martinez (2006) cited studies by Averst (1999), Booth and Zhang (1997), and Rohr (1996) that identified mental illness, such as conduct disorder, depression, and dysthymia, in 50% to 73% of youth in runaway samples.

Depression, suicidality, and self-harming behaviors appeared in the literature often. According to Whitbeck et al. (2000) symptoms of depression, underdeveloped skills to manage stress, potential for self-harm, and suicidal ideation were more common with RHY than non-RHY. Thompson et al. (2003) cited a study by Yoder, Hoyt, and Whitbeck (1998) that discovered that 80% to 90% of RHY suffered from serious mood disorders. Furthermore, McManus and Thompson (2008) highlighted that self-harming behavior, often in the form of cutting, was found to be disproportionately high amongst RHY. Some of these adolescents explained that cutting helped them avoid thoughts about the abuse they had faced and detach from their current life situations. In fact, “nearly half (47%) of participants in one recent study reported feeling no pain while engaging in various forms of self-mutilation” (McManus & Thompson, 2008, p. 96).
High-Risk Sexual Activity

In addition to psychological health concerns, the literature brought attention to physical health concerns for RHY. According to Busen and Beech (1997), a multitude of health problems arose for RHY often due to survival behaviors and substance abuse, including malnutrition, dental problems, skin conditions, respiratory infections, hepatitis, gastrointestinal conditions, and sexually transmitted diseases. Distrust of authority and lack of low-cost services compounded these health concerns with delayed medical care (Busen & Beech, 1997).

Although there were many physical health concerns outlined, problems related to high-risk sexual activity were a central focus in the literature. Riley, Greif, Caplan, and Macaulay (2004) cited high rates of adolescent pregnancy, prostitution, and survival sex by females and males who had been living on the run; which left this population vulnerable to sexually transmitted diseases. Booth, Zhang, and Kwiatkowski (1999) summarized three studies that found that initial sexual intercourse began at age 12.5 for RHY, which was two years earlier than non-RHY. Furthermore, multiple sex partners, the exchange of sex for food, drugs, money, or shelter, and lack of condom use were found to be significant concerns for the RHY population (Booth et al., 1999). One study in 2000 discovered that out of 879 sexually active RHY sampled, 70% reported engaging in unprotected sexual intercourse during a 6-month period (MacKellar et al., 2000).

Lastly, a myriad of studies focused specifically on HIV and consistently concluded that the RHY population was at a substantial risk for HIV due to unsafe sex practices and drug-use (Booth et al., 1999; Clatts et al., 1998; Ennett, Federman, Bailey, Ringwalt, & Hubbard, 1999).
Substance-Use

An overwhelming amount of literature confirmed a relationship between substance-use and the RHY population. Slesnick et al. (2000) detailed how omnipresent substance-use was with reference to various quantitative studies. Three studies found a rate of 70–85% of RHY abused substances and three additional studies found between 30% and 40% of RHY had used intravenous drugs. Koopman, Rosario, and Rotheram-Borus (1994) compared drug use behaviors of a non-runaway sample to a runaway sample, and identified that runaways were seven times more likely to use crack/cocaine (19% vs. 2.6%), five times more likely to use hallucinogens (14% vs. 3.3%), four times more likely to use heroin (3% vs. 0.7%), and three times more likely to use marijuana (43% vs. 15%).

Auerswald and Eyre (2002) and Kidd (2003), as cited by McCarthy and Thompson (2010), found that RHY had more favorable sentiments toward substance use and it was a common way to relieve stress and the negative psychological effects of trauma. Martinez (2006) concurred that these adolescents perceived drugs as a way to cope with their unstable life circumstances. Even those who had access to mental health services often refused to discuss their family problems due to a general mistrust of the system and, instead, turned to drugs as a means to alleviate emotional pain. Tyler, Gervais, and Davidson (2013) suggested substance-use may be viewed as “useful, and even necessary, given the cultural context of street life,” (p. 477) which included having to survive with confined resources.

Crime

The topic of substance-use often segued into one about crime. Yoder, Bender, Thompson, Ferguson, and Haffejee (2013) cited research that found that young people who used substances
were at risk for offending behaviors because it lowered inhibitions and increased their exposure to illegal situations. Not only was heavy use of substances found to be a prominent factor for violent behavior among the RHY population, many got “caught in a cyclical pattern by which they engage in criminal behaviors to fund their addictions (Bender et al. 2012)” (Yoder et al., 2013, p. 2).

Thompson et al.’s article from 2010 cited research by Baron and Hartnagel (1998), Heinze, Toro, and Urberg (2004), and Tavecchio, Stams, Brugman, and Thomeer-Bouwen (1999) that consistently showed that delinquent behavior was higher amongst RHY than non-RHY. Yoder and colleagues (2013) cited qualitative studies that found that among large samples of RHY, more than half reported having been arrested at least once and chronic runaways were nearly three times more likely to be arrested during adolescence than non-runaways.

Barwick and Siegal (1996) reported that it was “estimated that within 1 month, a youth on the street without resources [would] turn to crime to survive (Hersch, 1988)” (p. 650). Yoder, Muñoz, Whitbeck, Hoyt, and McMorris (2005) explained that RHY often engaged in criminal behaviors, such as steeling food, shoplifting, breaking and entering, using force to take money from somebody, engaging in prostitution, and dealing drugs, as a way to survive on the streets. These illegal behaviors were utilized “because they generate[d] immediate economic returns, [could] be used in any city, and require[d] fewer commitments, relationships, and responsibilities than traditional employment (Ferguson et al. 2011a)” (Yoder et al., 2005, p. 2). While participation in risky behaviors was common practice for RHY to survive street life, the unlawful nature of survival behaviors frequently positioned them in the criminal justice system (Yoder et al., 2005).

While the above studies portrayed RHY as the violators, other studies indicated that these
adolescents were often victims of crime. According to Guest, Baker, and Storaasli (2008) “adolescence who had run away from home were more likely to be exposed to higher levels of crime than same-age peers through proximity to offenders and lacking resources to protect themselves (Hoyt, Ryan, & Cauce, 1999; Kipke et al., 1997; Tyler, Hoyt, Whitbeck, & Cauce, 2001; Whitbeck et al., 2000)” (p. 290). Baron (2003) also highlighted the complex nature of being both offender and victim by explaining how RHY offenders were prime targets for other offenders because they could be victimized basically with impunity. First, RHY were less likely to go to the police to report after being victimized in fear of implicating themselves in crimes that they may have been involved in. Secondly, RHY often believed that law enforcement would negate their victim experiences, which created a sense that efforts to report would be fruitless.

**Educational Challenges**

Thompson et al. (2010) outlined research that provided insight into the educational challenges experienced by the RHY population which included frequent mobility, insensitivity and lack of awareness of school staff, inability to finish school assignments, limited access to mental health services, poor health, and unmet basic needs such as food, clothing, and health care. Furthermore, Thompson and colleagues (2010) stated “research has shown that students who experience residential instability often experience excessive school mobility. These youth are at increased risk of failing a grade (Heinlein & Shinn, 2000; Wood, Halton, Scarlata, Newacheck, & Nessim, 1993) and often have poor academic performance” (p. 199). Thompson, Zittel-Palamara, and Maccio (2004) referenced studies that found RHY attended school infrequently, were often suspended or expelled, and attained poor grades. Furthermore, RHY were more likely to attend alternative schools or drop out of school completely. In fact, Kurtz,
Jarvis, and Kurtz (1991) concluded that 40% of adolescent who ran away from home had not attended school while living on the streets. And Whitbeck et al. (2000) ascertained that chronic running away interrupted or diminished education progress.

Barwick and Siegal (1996) found that, overall, very little attention was focused on the school and learning problems of the RHY population, particularly whether learning problems stemmed from emotional problems and irregular school attendance or whether a specific learning disability was a causal link. In the study they conducted, the prevalence of reading difficulty and arithmetic/writing difficulty among a sample of 123 RHY was 52% and 28.5% respectively. Barwick and Siegal (1996) compared these RHY percentages to studies with the normal population and found a significant difference: 5% and 10% for reading difficulties and 6% for arithmetic/writing difficulties. Barwick and Siegal (1996) concluded that the severity of reading and arithmetic difficulties added a new dimension to the literature that predominately related to psychological and familial data. Furthermore, they urged service providers to implement education and training programs.

One topic that was investigated, but only appeared minimally in the literature, was Attention Deficit Hyperactivity Disorder (ADHD) with the RHY population. A study from 2003 acknowledged that an unexpected finding undoubtedly called for further research: Approximately 11% of 129 RHY sampled disclosed having problems related to ADHD (van Wormer, 2003). Due to limitations of the study, it was concluded that 11% was possibly underestimated. Van Wormer (2003) cited a study by Standford, Sandford, Helvie, Royal- Standford, and McLaughlin (1999) that revealed a correlation with homelessness and ADHD. After testing 51 homeless adults, an overall ADHD incidence rate was a startling 42%. Van Wormer (2003) also found that the National Health Care for the Homeless Council (2002) noted
a high-incidence of ADHD in children of homeless families. Although the Council (2002) and Stanford et al. (1999) speculated that ADHD may be a result of homelessness, van Wormer (2003) proposed an alternative view, that the school’s inability to meet the needs of children with ADHD led to school failure and subsequent poverty which then set the stage for homelessness in a society that was highly competitive. Of course, van Wormer (2003) pointed out and urged that more research was needed in the arena of ADHD and homelessness.

Positive Outcomes

Although most literature focused on negative aspects of running away, there was also some literature that brought attention to potential positive outcomes as a result of running away. Williams and colleagues (2001) conducted a multiple case study that explored attitudes and behaviors that contributed to resiliency among former runaways. What seemed to differentiate the more resilient from the less resilient individuals was the ability to adopt new behaviors that allowed for the development of self-esteem and self-efficacy. It was stated that “running away may be a potentially constructive coping strategy if youth are fleeing from highly conflictual and destructive family situations, if leaving home leads them into opportunities for more positive relationships with caring and competent adults” (p. 250). Similarly, a 2010 article by McCarthy and Thompson, also highlighted positive traits associated with the act of running away from home:

The decision to run away may be a proactive step to manage adversity (Kidd, 2003). Adolescents who are self-confident enough to believe they can manage stressors more effectively outside of the familial home may have higher levels of intrinsic problem-solving skills and resourcefulness (Rosenbaum & Ben-Ari, 1985). (p. 223)
As a final source, Washington (2011) cited several authors that considered several positive results associated with running away including resilience, survival, improved quality of life, and personal strength to adapt.

Runaway Homeless Youth and Exposure to Trauma

Trauma exposure was an extensive discussion in the literature. In fact, some literature explained how traumatic experiences, both before and after running away, were potentially the underpinnings to many of the negative implications highlighted in the previous section, such as depression, suicidality, substance-use, and crime. For example, Thompson, Cochran, and Barczyk (2012) discussed that an exposure to a traumatizing family environment, combined with running away, were likely to produce symptoms of depression, anxiety, and/or dissociation. And, another example, Yoder and colleagues (2013) discussed a relationship between traumatic experiences and illegal behavior:

It has been well documented that youth often leave home to escape abuse in their homes of origin (Ferguson 2009; Rotheram-Borus 1993; Tyler & Cauce 2002). Yet, even after leaving the traumatic situation, youth are often overcome with residual emotions, sensations, or reactions related to the trauma (Thompson, 2005). Unresolved feelings from early trauma can lead to poor self-regulation and coping skills (Thompson et al. 2006), and thus may place youth at risk for illegal behavior. (p. 6)

Although trauma-related experiences were identified as common occurrences in the lives of RHY, many authors argued that more research was in dire need due to the complex and cyclical nature of the trauma (Coates & McKenzie-Mohr, 2010; McCarthy & Thompson, 2010; McKenzie-Mohr, Coates, & McLeod, 2012; Sullivan & Knutson, 2000; Thompson et al., 2012;
Exposure to chronic family distress and maltreatment was found to play an integral role in a youth’s decision to run away (Arnold, Song, Legault, & Wolfson, 2012; McCarthy & Thompson, 2010; Williams et al., 2001). According to Thompson et al. (2012), “family conflict and maltreatment [were] primary reasons youth [gave] for running away or being forced out of the home by parents encouraging them to leave, abandoning them, or subjecting them to intolerable levels of abuse (Rotheram-Borus, 1993)” (p. 598). Martinez (2006) expanded Thompson et al’s (2012) sentiment further with a qualitative study that examined runaway behavior from the adolescent’s own perspective. Martinez (2006) found that adolescents gave clear and specific reasons why they ran away. Out of 23 participants, 100% claimed they “were attempting to escape an environment or a situation that was unpleasant or dangerous” (p. 80). Most grew up with violence and substance abuse within the home, many forced to care for themselves and siblings. Martinez (2006) also discovered that, despite the innate difficulties, the transition to street-life was generally perceived as not being any worse than what they had experienced at home. In fact, “their memory of what they ran from provided a perspective that helped them to endure hardships while on the run” (p. 80) and “their voluntary act of leaving gave them a greater sense of control over their life” (p. 80).

Thompson et al. (2003) cited several studies that echoed Martinez’s (2006) findings. These studies identified the primary reasons why adolescents ran away to be high levels of family conflict, abuse, maltreatment, criminality, and/or substance abuse. These families were characterized as “emotionally unavailable and lacking effective parenting skills and housing
stability (Bass, 1992; Whitbeck et al., 1999)” (Thompson et al., 2003, p. 2). Thompson et al. (2010) found that there was much literature that confirmed that running away was “often a last resort for adolescents dealing with unbearable situations (Schaffner, 1998)” (p. 194).

Study after study concluded authoritatively that there were high rates of familial abuse prior to running away. Yoder et al. (2013) cited studies by Baron (2003), Ferguson (2009), and Sullivan and Knutson (2000) that discovered 47% of RHY had been physically abused. A study performed by Whitbeck, Hoyt, and Ackley (1997) found a high percentage of RHY that reported physical and sexual abuse by adult caretakers prior to running away. Specifically, 86.1% of the 108 sampled RHY reported being pushed, shoved, or grabbed by caregiver in anger, 78% reported being slapped, 70% reported being hit with an object, 42.6% reported getting beat up, 28.7% reported being threatened with a gun or knife (7.4% assaulted with a gun or knife), 23.1% reported being forced to engage in sexual activity, and 21.3% reported verbal requests were made for sexual activity. Percentages from an earlier study by Powers, Eckenrode, and Jaklitsch (1990), were similar. With a sample of 223 RHY, 60% allegedly experienced physical abuse, 48% neglect, 42% emotional abuse, and 21% sexual abuse. This study found that biological mothers were the most frequently cited perpetrators of abuse and maltreatment at 65% followed by biological fathers at 45%. Overall, the existence of violence in the lives of RHY appeared to be irrefutable due to the number of studies that demonstrated distressing incidences of physical and sexual abuse. This was exemplified by Baron’s article from 2003 that cited 26 studies that focused on and discovered how common physical and sexual abuse were in the lives of the RHY population.

Tyler and Cauce (2002) also found that approximately 50% of 372 RHY reported being physically abused and 33% sexually abused. Moreover, several additional findings resulted from
this study. First, the majority of participants that were abused rated the abuse as extremely violent, lasting for at least 1 year. Compared to males, females experienced significantly higher rates of sexual abuse, but individuals who self-identified as gay, lesbian, or bisexual experienced the highest rates of both physical and sexual abuse when compared to their heterosexual counterparts. Third, 35% of those abused reported four or more perpetrators. A final finding that added to the literature was that, although the majority of adolescents told an adult about the abuse, more than 75% of these adults were not concerned nor supportive about the situation. Tyler and Cauce (2002) concluded that, given the majority of adolescence had no one to turn to in wake of abusive situations, it was not a surprise that so many runaways report leaving home due to abuse.

Not only were these youth immersed in violent environments that led to their own victimization, they also witnessed violence in the home. Baron (2003) pinpointed one study (Russell, 1998) that found almost half of the RHY respondents reported witnessing violence in the home. In addition, the likelihood of witnessing a domestic dispute were 5.8 times higher among RHY who disclosed a history of physical abuse than those who reported no history of physical assault. As a result, many RHY came from environments where they, and everyone around them, were subjects to violation (Baron, 2003).

Another correlation that emerged in the literature regarding family environment and runaway activity was the frequent reports of alcohol and drug problems within the family system. Thompson, Maccio, Desselle, and Zittel-Palamara (2007) referenced one large-scale study by Whitbeck and colleagues (1997) where over half of RHY reported that at least one parent had an alcohol problem. Furthermore, 20% reported that both parents had an alcohol problem and 33% thought at least one parent had a problem with hard drugs. Thompson et al.
(2007) stated that parental alcohol/drug use contributed to family conflict, violent confrontations, and could even create an inability or lack of desire for the parent to meet the needs of an adolescent child resulting in “heightened adolescent mental health problems, such as youth substance abuse, relationship difficulties, and continued runaway behavior (Kurtz, Jarvis, & Kurtz, 1991)” (p. 555).

**Cycle of Trauma**

As the previous section exemplified, many RHY left home in search of safety; a reality few successfully accomplished, as life on the street was marked by hunger, violence, and exploitation (Martinez, 2006). Unfortunately, the literature supported the argument that the very act of “leaving home to escape victimization actually serve[d] more to exacerbate potential victimization than alleviate it” (Baron, 2003, p. 33). Fittingly, Coates and McKenzie-Mohr (2010) coined the term “out of the frying pan, into the fire” as a way to describe youths’ transition from unsafe home environments to unsafe street environments. This was explained further with this statement:

… while exposure to highly stressful experiences frequently occurs prior to a youth becoming homeless, traumatic experiences also occur as a consequence of being homeless (Gwadz, Nish, Leonard, & Strauss, 2007; Kamieniecki, 2001; Karabanow, 2004a; McCormick, 2004; Stewart et al., 2004). Goodman, Saxe, and Harvey (1991) extend this point, arguing that homelessness itself can be understood as a form of psychological trauma. For youth on the street, the common experience of violence and rejection has repercussions that can lead to or exacerbate negative effects of trauma. (p.68)
McManus and Thompson (2008) also expressed how the act of prematurely exiting the home is in itself a form of psychological trauma experienced by these young people. The continuation of trauma and victimization after a youth ran away was prominently featured in the literature.

Bender, Thompson, Ferguson, Yoder, and Kern (2013) sampled 145 youth from Los Angeles, Denver, and Austin and found that the most common traumas experienced on the street were an unexpected death of a friend or loved one (62.8%), witnessing a severe assault (55.2%), receiving death/bodily harm threats (52.1%), being physically assaulted by an acquaintance or a stranger (51.7%), and seeing someone overdose on drugs (47.6%). These youth reported, on average, experiencing three types of trauma on the streets.

Chun (2012) also pointed out that once an adolescent left home, new stressors materialized as life was navigated on the streets. Chun (2012) referenced research that indicated that some of the top stressors were losing their home or friends, family conflict, threats to physical safety, violence, fear, and bullying by peers. And McManus and Thompson (2008) stated, “life on the street is characterized by extremely impoverished conditions, constant threats to survival in terms of daily struggles to meet basic needs (Ayerst, 1999), repeated victimization, and decreased life expectancy (Gaetz, 2004; Tyler, Hoyt, Whitbeck, & Cauce, 2001; Whitbeck & Hoyt, 1999)” (p. 93). Furthermore, “the detrimental effects of traumatic experiences often inhibit homeless youths’ ability to employ the psychosocial skills necessary to transition out of homelessness (Stewart et al., 2004)” (p. 93-94).

The linkage between victimization and RHY was frequently analyzed through a “lifestyle exposure/routine activities perspectives” (Baron, 2003, p. 35). Baron (2003) referenced 6 studies that supported the idea that RHY’s lifestyles and daily routines exposed them to dangerous people and places, which then created opportunities for crime and an increased potential for
victimization. Baron (2003) summarized “the street provides an avenue in which subcultural rules are learned and reinforced. The potent combination of the stresses of poverty, violent home backgrounds, social isolation with violent peers, social rewards, victimization, and violent models in a dangerous environment creates a situation where rules supportive of violence emerge and where these rules guide behavior” (p. 32).

As with physical and sexual abuse prior to running away, consistent statistics within the literature regarding victimization after running away were just as distressing. In just one article (Baron, 2003), there were 11 cited studies that all determined that once on the street, RHY were at risk for both physical and sexual victimization. Bender, Ferguson, Thompson, Komlo, and Pollio (2010) cited research by Stewart et al. (2004) that found 83% of RHY reported exposure to at least one form of victimization since leaving home. Whitbeck and Simons (1997) distinguished types of victimization and discovered that out of 108 RHY sampled, 55.1% reported being robbed, 49.5% were asked to break the law, 42.1% were forced to go a day without eating due to no access to food, 41.1% were threatened with a weapon, 35.5% were beaten up, 34.9% were asked to do something sexual, 23.4% were assaulted or wounded with a weapon, and 19.6% were sexually assaulted or raped. A similar study (Terrell, 1997) found that out of 240 RHY sampled, 49.6% were threatened with a weapon, 45% were beaten up, 36.6% were propositioned for sexual favors, 35% were assaulted with a weapon, 23.2% had been robbed, and 20.7% were sexually assaulted while on the streets. Lastly, Tyler, Hoyt, Whitbeck, and Cauce (2001) found that 36% of the 368 RHY sampled reported that they had experienced some form of sexual victimization.

Given this pattern of victimization, it was not surprising that RHY reported high levels of fear when it came to personal safety. Kipke, Simon, Montgomery, Unger, and Iverson (1997)
revealed that the majority of respondents (n=432) were afraid of being shot or stabbed, and almost half experienced fear of being beaten up or sexually assaulted. Baron (2003) cited research by Alder (1991) that found 92% of RHY felt scared for their personal safety. This statistic made sense since 86% in that study reported being physically harmed since leaving home.

A relationship between maltreatment and abuse at home prior to running away and a youth’s increased risk of victimization once on the streets was found in the literature as well. Thompson et al. (2010) referenced two studies by Hoyt, Ryan, and Cauce (1999) and Ryan, Kilmer, Cauce, Watanabe, and Hoyt (2000) that both concluded that adolescents who were physically abused by their families were significantly more likely to be assaulted on the streets than adolescents who were not abused by their families. Martinez (2006) also highlighted a study that found that youth who were exposed to maladaptive family settings often selected them into settings that perpetuated negative behaviors and interactions.

A final point that emerged in the literature regarding the cycle of trauma and how it uniquely connected with RHY was the invisible and marginalized nature of this particular population. Karabanow (2008) articulated this sentiment with this poignant statement:

Everything about being young and homeless inspires critical and often demeaning responses from others in mainstream society … They are a traumatized population located outside of the formal market economy, describe experiences of marginalization and stigmatization within civil society, are continually surveilled and harassed by both social control agents and members of civil society by their very nature of “being homeless,” are poor and isolated, have little in terms of social capital and social margin, appear “different” in looks and attire, have the added burden of being young in terms of
locating employment and shelter, and spend much of their street existence within the public arena, concerned with basic survival needs such as shelter, food, clothing, and social support. (p.786)

**Pervasive Trauma**

As the previous two sections brought to light the existence of trauma in the lives of RHY both prior to and after running away, it was difficult to ignore the pervasive quality of the trauma. Not only was trauma identified as a common occurrence, it was often embedded in the daily lives and in multiple manifestations for RHY. In other words, trauma was not an exception; it was a constant reality. In support, McKenzie-Mohr et al. (2012) stated, “In essence, trauma in the lives of these youth must be understood as a pervasive reality (both before and after becoming homeless) that involves potentially wide-ranging and severe repercussions” (p. 137) and Bender et al. (2010) stated, “Victimization and trauma are often part of the daily life of homeless youth” (p. 161).

The research established that trauma was not a secluded, one-time event. Poly-victimization and chronic trauma was ubiquitous. In a study that interviewed 100 RHY, on average, both males and females had faced 11 to 12 different kinds of highly stressful events, about half prior to and the other have after leaving home (Coates & McKenzie-Mohr, 2010). Forde, Baron, Scher, and Stein (2011) examined five forms of maltreatment, including emotional abuse, physical abuse, sexual abuse, emotional neglect, and physical neglect. Mean trauma scores fell into the moderate to severe range on all abuse/neglect clinical scales with 98% reporting one or more forms. Furthermore, 27.4% or males and 48.9% of females reported all five forms of abuse/neglect. Gwadz, Nish, Leonard, and Strauss (2007) also examined
prevalence of multiple types of trauma that occurred in and out of the home and found that 63.5% RHY had experienced multiple types of trauma. Baron (2003) cited a couple studies that revealed that being a victim of one type of abuse increased the potential of being a victim of another form of abuse: 1) Janus, Burgess, and McCormack (1987) found that 72% of RHY who were sexually abused had also been physically abused and 2) Craig and Hodson (1998) confirmed this finding in their study with 75% who reported being both sexually and physically abused. As a final reference that supported the notion of pervasive trauma, Tyler and Cauce (2002) contended that, not only were numerous forms of physical abuse experienced but 35% were abused by four or more different perpetrators. Tyler and Cauce (2002) highlighted a plausible reason for this by referencing Hagan and McCarthy (1997) and Whitbeck and Hoyt (1999) who explained that many RHY weathered numerous changes in family structure, such as divorces, separations, remarriages, and boy/girlfriends coming and going, which subsequently resulted in an increase of potential perpetrators within the home environment.

**Stress Response and Trauma**

The task to review the entire scope of literature pertaining to the various affects of pervasive trauma — developmental, neurobiological, physiological, psychological, etc. — was quite vast and complex to entertain. Instead, the search focused on the two most defining aspects of the RHY population: 1) the physical action of running away and 2) trauma as an embedded part of life. Therefore, this section of the literature review specifically targeted information about the way in which the human body responded to stress and trauma. Furthermore, the concept of “fight-or-flight” survival response was very intentionally examined per the “flight” aspect of runaway behavior.
The Human Stress Response: “Fight-or-Flight”

Olff (2012) acknowledged that any kind of stress, positive or negative, naturally activated the stress system within the human body. Furthermore, this activation was a healthy response and integral to human survival. Olff (2012) explained that stress activated important nuclei in the brain, released hormones, and alerted the peripheral nervous system as a way for the body to gear up to confront danger. Walter Cannon (1929) termed this primal survival instinct as “fight-or-flight.” The term “fight-or-flight” response was defined by the Encyclopaedia Britannica (2014) as a “response to an acute threat to survival that is marked by physical changes, including nervous and endocrine changes, that prepare a human or an animal to react or to retreat.” Additionally, the “fight-or-flight” response was characterized by an increased heart rate, anxiety, increased perspiration, tremor, and increased blood glucose concentrations.

Silove (1998) stated that the automatic defense system and its close connection with the “fight-or-flight” mechanism provided humans with a proficient form of protection against threat and danger. Valent (2007) remarked that “flight” was universally present in animals and all human cultures and, as an example, reflected on how infants automatically move their gazes, heads, and limbs away from fearful stimuli. Valent (2007) contended that “flight” was the dominant survival strategy researched in both animals and humans. Furthermore, it was the physiological and clinical reference point in posttraumatic stress disorder.

The Origins of Posttraumatic Stress Disorder

Literature emerged that suggested that the “fight-or-flight” survival response was embedded into the conceptualization and formulation of the posttraumatic stress disorder (PTSD) diagnosis. Carrion and Wong (2012) stated, “Trauma acts as a threat to an individual’s well-
being, thereby activating a neurobiological stress response. Although necessary for survival, chronic and frequent physiological stress responses can alter brain development, leading to dysregulation of neural circuitry.” (p. 524). Silove (1998) similarly explained that because PTSD was activated by serious threats to one’s life and safety, it seemed probable that the reaction would involve neural mechanisms affiliated with the survival of the species. Evolutionary theory asserted that organisms, including humans, were biologically selected for their ability to survive environmental threats and the brain plays the primary role in understanding and reacting to extreme danger (Silove, 1998).

The majority of the stress response literature was found within the framework of PTSD. Baldwin (2013) wrote, “Cannon (1932) contended that we respond to stress with sympathetically mediated actions (i.e., fight or flight). Clinicians and researchers followed his lead by categorizing PTSD as an anxiety disorder (APA, 1980, 2000; Gray and McNaughton, 2000)” (p. 1,550).

PTSD was first introduced into the Diagnostic and Statistical Manual of Mental Disorders, 3rd Edition (DSM-III; American Psychiatric Association [APA], 1980). Van der Kolk, Roth, Pelcovitz, Sunday, and Spinazzola (2005) summarized that, in the late 1970s, Vietnam veterans were commonly inflicted with serious psychiatric problems. A new diagnosis called posttraumatic stress disorder was originated in an attempt to encompass their psychopathology. The DSM committee relied on sparse research that only included clinical descriptions of war neuroses, male burn victims, and Vietnam veterans. However, van der Kolk et al. (2005) stated “Despite these humble origins, PTSD has been found to be an enormously useful diagnostic construct with wide applicability to different victim populations and with its own unique neurobiology and therapeutics” (p. 389). The DSM-IV-TR (American Psychiatric Association
[APA], 2000) outlined three primary clusters of PTSD symptoms: 1) Re-experiencing, such as flashback memories; 2) Avoidance and emotional numbing, such as feelings of detachment or difficulty recalling the trauma; and 3) Increased arousal, such as hyper-vigilance or angry outbursts.

Posttraumatic Stress Disorder and Runaway Homeless Youth

The literature consistently urged that more PTSD research with a concentration on children and adolescents was needed in general (Gwadz et al., 2007; McManus & Thompson, 2008; Thompson et al., 2007). Perrin, Smith, and Yule (2000), cited by Thompson and colleagues (2007), highlighted that the existing PTSD research that focused on children and adolescents was limited to subjects exposed to wars, natural disasters, sexual abuse, and violence. Very few studies examined PTSD among young people exposed to chronic and repeated traumatic events. And even less was known about youth who had run away or was forced out of parental homes. McManus and Thompson (2008) reflected upon this unfortunate lack of research, despite the debilitating consequences of trauma on youth:

Exposure to trauma during these developmental periods can derail emotional growth and adversely affect youth’s self-esteem, emerging sense of self, developing conceptualization of the world, ability to relate to and trust others, manage stress, plan for the future, and avoid future victimization. Adolescents who lack fundamental cognitive, emotional, familial, societal, and cultural supports are at increased risk for suffering adverse effects of trauma exposure (Becker et al., 2004a, 2004b). (p. 93)

Of the few studies that focused on PTSD and runaway youth, rates were found to be remarkable salient. Thompson and colleagues (2012) cited three such studies. Two studies found
that 18% to 31% of the RHY sampled met diagnostic criteria for PTSD. A third study found the lifetime prevalence rates for PTSD for runaway females was 45% and 24% for males. When compared to community samples of adolescents, which range from 6.3% to 7.8% (Giaconia, Reinherz, Silverman, & Pakiz, 1995), the RHY rates were significantly higher. Another study (Bender et al., 2010) confirmed that RHY experienced disproportionately high rates of trauma (57%) and DSM-IV criteria for PTSD (24%). Thompson et al. (2007) suggested that the above-mentioned studies warranted concern about the vulnerability of RHY for developing PTSD symptoms and how the early departure from familial homes, even when abusive and dysfunction, may be a catalyzing factor in the development of trauma-related symptoms.

Another emergent theme conveyed in the literature was how PTSD diagnosis and symptoms may not be congruous for RHY who have been exposed to such pervasive trauma. “Given the complex and tumultuous social realities of this population, it may be more effective to assess these behaviors based on an understanding of homeless youth trauma as cumulative and dimensional rather than categorical (see Davis, 1999)” (Coates & McKenzie-Mohr, 2010, p. 70). McManus and Thompson (2008) posited that many of the symptoms exuded by RHY, such as difficulty sleeping or hyper-vigilance, may be characteristics of living on the street rather than PTSD. For instance, according to Ayerst (1999), many RHY reported that they often purposefully remained awake for days, as they needed to guard their own safety, as well as the safety of their RHY peers. McManus and Thompson (2008) discussed distrust of others, especially adults, as another form of hyper-vigilance that evolved from tragic experiences of exploitation and victimization by adults, including members of their own family. Consequential behavior, such as being extremely distrustful and keeping a guard up, could be considered a normal reaction given the youth’s real-life experiences.
The article by McKenzie-Mohr et al. (2012) also highlighted a critique of the PTSD diagnosis with this population with reference to Burstow (2005), who argued that PTSD was rooted in a naïve assumption that the world was a benign and a safe place:

Dangerously, the [PTSD] diagnosis can thus impose a hegemonic worldview that rejects a person’s knowledge when traumatic experience in his or her life is the rule rather than the exception and preparedness for danger can be vital for survival (Burstow, 2005). By ignoring the context in which trauma occurs and is named, the individual is inherently held responsible for his/her response to highly distressing circumstances, and even, for the experience itself. As a result, the potential for stigmatization is further heightened (Feinstein & Dolan, 1991). (p. 136)

**Ongoing Traumatic Stress Response**

Diamond, Lipitz, and Hoffman (2013) proposed an alternative view of the stress response activated by trauma that diverged from PTSD. Due to the on-going nature of trauma in the lives of RHY, the inclusion of this concept of ongoing traumatic stress response (OTSR) garnered attention. The crux of this view was all about perceived danger in regards to past trauma (PTSD) versus real danger in regards to current, ongoing trauma (OTSR). Diamond and colleagues (2013) stated, “As opposed to most individuals diagnosed with PTSD, it is important to keep in mind that people living under conditions of ongoing traumatic stress are currently in danger, and thus their emergency reactions, including avoidance and hyperarousal, can be understood as natural, protective, adaptive responses” (p. 102). They suggested that anxiety responses to ongoing traumatic stress were normal reactions to abnormal conditions, whereas PTSD anxiety responses were abnormal reactions to normal conditions. OTSR was not presented as a
diagnosis. Rather, it was a means to address a spectrum of non-pathological, but clinically relevant, responses that may occur when ongoing traumatic stress was a factor.

There were three primary reasons given regarding the importance of distinguishing OTSR from PTSD. First, the psychobiological etiology underlying OTSR may be quite different than the etiology of PTSD and ripe for research. Second, individuals suffering from OTSR may require different interventions. For example, effective treatment of PTSD may include exposure and emotional processing, whereas effective treatment of OTSR may include distraction, distancing, supportive interventions, psychoeducation, or possibly no treatment at all. In conclusion Diamond et al. (2013) wrote:

… Diagnosing individuals suffering from OTSR as having a psychiatric disorder — in this case, PTSD — can lead to the pathologizing and stigmatization of entire populations of people who are, essentially, doing their best to cope with unreasonable, terrifying circumstances. The sociopolitical implications of ‘blaming the victim’ are such that individuals in harm’s way may be perceived as weak and defective, while those responsible for not sufficiently buffering parts of the population from stress, uncertainty, and threat are not held accountable. (p. 102)

Art Therapy and Runaway Homeless Youth

The only criteria this researcher set forth for this art therapy section, was that the literature must include, in any capacity, art therapy and the RHY population. Despite the broad search, only three articles surfaced.

Howe, Burgess, and McCormack (1987) collected data from 149 adolescents who entered a Canadian crisis shelter for runaway youth. Several methodologies were utilized for the study
including a structured interview, standardized tests, and a human figure drawing. Although the overall purpose of the study was to measure family environment, reasons for running away, prior physical/sexual abuse, physical and emotional symptomatology, prior delinquent activities, self-concept, stress, and coping behavior, Howe and colleagues (1987) focused on the human figure drawings and abuse histories: no abuse, physical abuse, sexual abuse, and both physical and sexual abuse. Gender, figure completion, integrity of line quality, use of color, and graphic indicators of sexual anxiety were assessed and coded. Key findings were: 1) Females who were sexually abused were more likely to draw a figure of the opposite sex than females that were not sexually abused, 2) Integrity of line quality revealed 66% of sexually abused population had a faint/sketchy line quality and an absence of bold lines, and 3) Color was typically avoided by all groups, but 92% of the sexually abused sample avoided color. No significant differences occurred among the groups in figure completion or the indicators of sexual anxiety. The authors concluded that there was a need for a “non-invasive, objective (non-leading) assessment procedure that is both reliable and sensitive enough to reflect aspects of a child’s response to the abuse” (p. 40) and that assessment through drawings should be re-examined.

Prescott, Sekendur, Bailey, and Hoshino (2008) used both quantitative (n=212) and qualitative measures (n=3) to explore art making and resiliency in homeless youth at a drop-in shelter. The quantitative data revealed than the youth who attended the art center more often had a significantly higher number of life achievements, such as ending drug use, getting employment, obtaining housing, participating in academics, and improving social skills. Although there were only three participants, the qualitative component gave insight into individual experiences. All three individuals described the importance of art making for them; “one even felt that people without art were ‘oppressed’” (p. 161). Four themes emerged regarding the art. The first theme,
art as a friend, had “an attribute of availability; for example, on participant noted that ‘people can’t always help’ but art [was] always there for you (p. 161). The second theme, art as a savior, referred to the idea that art often rescued its maker from drugs, self-harm, and suicidal ideation. The third theme, art as shaper of identity, performed a vital role since all participants identified themselves as individuals who were creative and interested in artistic careers. The fourth theme, art as a safe place, related to escapism and was an avenue to express strong and difficult emotions. Prescott and colleagues (2008) acknowledged that there had been very few studies that addressed homeless youth in general, much less homeless youth and art making. In conclusion, this study gave “both numerical and narrative evidence for the power of art making and creativity” (p. 162).

In similar sentiment, Kidd (2009) stated, “Despite the importance of artistic expression in the lives of many homeless individuals, formal documentation of the topic is lacking” (p. 353). Kidd’s 25-page article was autobiographical as he reflected on the culmination of his research projects about homeless youth. Kidd (2009) explained that, “at the end of the interview, seemingly as an afterthought, I asked the kids, ‘Write or draw anything you want people to see’ and gave kids a blank sheet of paper and some markers” (p. 346). It was in this article Kidd (2009) specifically wrote about the youths’ art. The emergent meanings Kidd (2009) discovered included “art as being transformative, self exploratory, communicative, and a redirection of emotional energy into an artistic medium and expressive process” (p. 345). Furthermore, Kidd (2009) examined the parallels between the art and the marginalization of homeless youth and Outsider Art movements. Despite the complex definition of Outsider Art, Kidd (2009) summarized that Outsider Art included works that were “largely self-taught, work done largely for oneself and for the pleasure of creation, as something palliative, passionate, that gives
meaning to life, that is spontaneous, and that appears to create a visual language to communicate with the self (Cohen & Cox, 2001; Crick, 1980; Muri, 1999; Rexer, 2005)” (p. 353). Kidd (2009) cited several authors who described the Outsider artists as elderly, socially, economically, and psychologically displaced, those who resist normalization, and those with histories of trauma and loss. In conclusion, Kidd (2009) wrote:

My answers, in engaging in this project and writing about it, are that creation can be transformative both for homeless young people and the viewers/readers of their work, and it can provide a vehicle for the connection and understanding that can bypass racist, bigoted, and otherwise ignorant ideas. I also believe that many of these youths possess a unique vision of our world from their position as outsiders across many dimensions. They are indeed “extremists in thinking and feeling” as Dubuffet put it (Dubuffet, 1950/1995, p. 131). (p. 359)

Prescott and colleague’s (2008) and Kidd’s (2009) research suggested that art making was a powerful mechanism for homeless youth and garnered more attention from the psychology field, as well as policy makers, to enact change, promote funding, and develop programs and interventions to serve the unique needs of the RHY population.

**Conclusion**

The literature outlined the complications that arose when addressing the prevalence and incidence rates of RHY due to inconsistent definitions the term “runaway” and other terms embedded into the concept of runaway youth, such as “homeless,” “thrownaway,” and “street” youth. The literature revealed a strong correlation between the RHY population and trauma, not only prior to running away, but also after running away. Physical, emotional, and sexual abuse,
as well as neglect, were often cited as reasons why adolescents ran away from home. Trauma was typically found to be pervasive and chronic in nature, meaning the trauma was: 1) on-going, 2) catalyzed by multiple perpetrators, including caregivers but not limited to caregivers, and 3) experienced in several forms. The mental and physical consequences after running away were found to be profound as well. While most literature highlighted negative implications for RHY, such as depression, high-risk sexual activity, substance-use, and crime, a few articles conveyed how the act of running away could produce positive outcomes, such as personal growth and obtaining much-needed support.

There was no literature unearthed that directly linked RHY to the survival response of “flight.” Rather, the literature focused on PTSD, whose origin was embedded with the “flight-or-flight” concept. Research revealed that RHY often displayed PTSD symptomology; however, a theme in the literature arose that captured a critical view of PTSD, as it not always captured the symptoms that resulted from trauma, particularly complex trauma and/or ongoing trauma.

The art therapy literature yielded very narrow landscape regarding RHY in general. The lack of information about RHY and art therapy highlighted a rich opportunity for exploration.

Overall, the researcher found that the general literature was repetitive and dominated by quantitative methodology. While research that concretized patterns and solidified validity were beneficial and, an overall strength, it prohibited a deeper understanding of the RHY population, the trauma they endured, and their response to trauma. This literature review further emphasized the need for an in-depth, reflective case study, for both the general psychology and the art therapy field.
IV. RESEARCH APPROACH

A qualitative method deemed most fitting for this research study. Creswell (2009) helped identify why, with three significant points. First, Creswell (2009) stated that qualitative research was a way to explore and understand individuals or groups that had been afflicted by a human or social problem. Runaway youth could be viewed as both a human and a social problem. Secondly, a qualitative approach allowed for the complexity of a situation and individual meaning to emerge and be highlighted in the final written report (Creswell, 2009). This flexibility and inductive style was well suited for the key research questions posed. Lastly, qualitative methods typically did not bring individuals into a contrived environment. In contrast, information was more often gathered within one’s natural environment over a sustained period of time (Creswell, 2009). The runaway youth shelter provided space and time to interact with and gain information in a setting where runaway youth naturally gathered, resided, and received therapeutic treatment.

The researcher reasoned that a case study approach, a sub-category within the broader context of qualitative research, was most appropriate because of the great learning potential that could be gained from an individual’s life experiences prior, during, and after running away from home. The likeliness that trauma and clues into survival responses would surface was high due to the in-depth nature of a case study. Stake (1995) solidified the choice of approach by affirming that a case study was an ideal option for studying unique people or events, or if one had access to cases tied by time, place, and population, and one is concerned with detailed and layered understanding or comparison.
Additionally, case studies also allowed for the researcher to accumulate knowledge prior to devising a full-scale study (French, Reynolds, & Swain, 2001). The researcher found herself immersed in this population by way of her practicum, which was at a runaway homeless youth shelter. This provided the researcher with the foundation for her quest to further understand and acquire knowledge about this population. A qualitative case study was a logical first step to quench her growing curiosity as well as catalyze ideas for subsequent research. Moreover, the lack of research within the field of art therapy and general psychology pertaining to runaway youth, trauma, and the survival response, a case study would, in the very least, create a dot on the map and potentially lead the way for future research.
V. METHODS

Introduction

The purpose of this section is to highlight the methods used to conduct the research study. Common terms used in the study are clarified in the first section, followed by a section that details the design of the study, including the sampling procedure, how the data were gathered, and how data were analyzed.

Definition of Terms

Runaway Youth: The Runaway and Homeless Youth Act (2008) defined a runaway as “an individual who [was] less than 18 years of age and who absent[ed] himself or herself from home or a place of legal residence without the permission of a parent or legal guardian” (sec. 387. definitions).

Homeless Youth: According to The Runaway and Homeless Act (2008), there were essentially three criteria for a youth to be considered homeless: 1) The youth was under 21 years of age; 2) It was not possible for the youth to live in a safe environment with a relative; and 3) There were no other safe alternative living arrangements for the youth. Parental permission emerged as the most significant differentiating factor between the definitions of homeless youth versus runaway youth.

Runaway Homeless Youth (RHY): Due to the overlapping and interchangeable nature of the terms “runaway youth” and “homeless youth,” the term “runaway homeless youth” (RHY) was
the most frequented phrase to describe the runaway population. The literature lacked a distinct
definition for “runaway homeless youth.” Rather the term simply melded both runaway and
homeless definitional aspects into one term. Resources attempted to distinguish the two terms
with two definitions; however, the circular complexities that arose while attempting that task,
created the necessity for a term that encompassed both “runaway” and “homeless” definitions.

**Thrownaway Youth:** Thrownaway youth was defined as youth who were forced out of the home
due to parental abandonment, parents not allowing them in the home, or severe levels of abuse or
neglect (Farrow, Deisher, Brown, Kuling, and Kipke, 1992).

**Street Youth:** The term street youth referred to runaway or thrownaway youth who spent some or
all of their time in various public locations (Baron, 2003).

**Trauma:** The DSM-IV-TR (American Psychiatric Association [APA], 2000) defined trauma as a
“direct personal experience of an event that involve[d] actual or threatened death or serious
injury, or other threat to one’s physical integrity; or witness[ed] an event that involve[d] death,
injury, or a threat to the physical integrity of another person; or learn[ed] about unexpected or
violent death, serious harm, or threat of death or injury experienced by a family member or other
close associate” (p. 463).

**Human Stress Response:** According to Olff (2012), the human stress response was a healthy
response to any kind of stress, positive or negative. Stress naturally activated the stress system
within the human body. As part of this activation, nuclei in the brain released hormones that
alerted the peripheral nervous system so the body would be geared up and prepared to confront danger, which was integral to human survival.

“Fight-or-Flight” Response: The term “fight-or-flight” response was defined by the *Encyclopaedia Britannica* (2014) as a “response to an acute threat to survival that is marked by physical changes, including nervous and endocrine changes, that prepare a human or an animal to react or to retreat.” The “fight-or-flight” response was characterized by an increased heart rate, anxiety, increased perspiration, tremor, and increased blood glucose concentrations.

Traumatic Stress Response: Wilson, Hansen, and Li (2011) explained that a traumatic stress response was when the human stress response faced a stressor so acutely traumatic or so chronic in nature that the system itself was altered. While PTSD focused on the altered biological response to trauma; the concept of traumatic stress response was more comprehensive and considered the individual's environment, the nature of the traumatic event, the response of the neurochemical cascade within the brain, and how the individual’s functioning was affected by the neurochemical cascade all play a role.

Posttraumatic Stress Disorder (PTSD): According to the DSM-IV-TR (American Psychiatric Association [APA], 2000), a PTSD diagnosis was a development of symptoms after a person was directly exposed to or witnessed a traumatic event. The response to the event must involve intense fear, helplessness, or horror. Symptom clusters included: 1) Re-experiencing; 2) Avoidance and emotional numbing; and 3) Increased arousal.
Design of Study

A singular case study was utilized for the research. The purpose of the case study was to examine an individual’s runaway experience with an in-depth and holistic lens, utilizing art therapy. As a way to formulate structure and foci to the case study, the following study questions were created:

1) How did the runaway experience surface in treatment and the art?
2) What kind of themes emerged in the imagery and content of the art?
3) Were traumatic experiences visible in the art? If so, what type of trauma and at what point in treatment did trauma emerge in the artwork?
4) Were there observations in the art, the art process, and/or behavior that was indicative of the survival response of “flight?”
5) Was there a relationship between the traumatic experiences and running away?

Sampling

The singular participant was selected from a transitional living program (TLP) for runaway homeless youth located in Los Angeles. The TLP was the location of the researcher’s Marital and Family Therapy and Art Therapy practicum from September of 2013 until May of 2014. The participant was selected from the researcher’s clinical caseload during her time as a trainee. The participant met the criteria for the case study by being a youth who had had a runaway experience and history of trauma. A pseudonym was used throughout this paper and any identifying information deleted to protect the participant’s identity. The participant, who was over the age of eighteen, gave consent that allowed artwork and clinically relevant information to be included in the research. It should be noted that bias could have emerged with the sampling
procedure due to the limited nature of long-term individuals assigned to the researcher as a trainee.

Gathering of Data

Prior to treatment or participant selection, it had been determined that a reflective case study was most appropriate due to the exploratory nature of the research topic. Therefore, no specific procedures were initiated for the data gathering process. The participant experienced the natural course of art therapy treatment. The artwork and clinical notes that resulted from treatment were collected and used as data. Data gathering began on September 13, 2013 and ended on March 1, 2014.

Analysis of Data

A phenomenological-informed approach was adapted to analyze the data. Kapitan (2010) described the phenomenological approach as a process of “pre-reflection, reflection, reduction, and concentrated description aimed at uncovering its essence while always referring back to its original sources” (p. 141). The data were analyzed beginning with an objective, broad view and moved progressively toward a subjective, theoretical view.

The first stage involved an examination of the data in chronological order to gain a broad perspective on the data collected. General connections and patterns were observed and noted during this stage, but limited to observable phenomena, such as the participant’s words, actions, and processes while in therapy.

The second stage involved a development of emergent themes that stemmed from the art products made in session. Form (media, color, line quality, and composition), content (what the
image was), and meaning were examined. The participant’s perspective about the experience of creating the art and the meaning of the art was analyzed, as well as, the researcher’s understanding and interpretation of unconscious and latent content. From here, universal themes and patterns were visible and described.

During the final stage, the researcher synthesized a perspective on the essential meaning belonging to the phenomenon of running away in relationship to trauma and the “flight” response. Through all stages of the analysis process, the study questions and information from the literature review were considered and used as a way to guide the analysis.
VI. RESULTS

Presentation of Data

Introduction

This section begins with information about Marco (pseudonym), including identifying information, presenting problem, family history, medical and psychiatric history, mental status exam, DSM-IV-TR diagnosis, dynamic formulation, treatment goals, and treatment plan. A written overview of sessions 1 through 25, along with the correlating artwork, is then presented. A complete list of figures can be found on page 140.

Identifying Information

Marco was an 18-year-old, Latino, gay male participating in a transitional living program (TLP) for runaway homeless youth. At age 17, Marco ran away from home due to emotional and physical abuse by his father, who was the primary caregiver. A suspected child abuse report was filed, followed by an investigation by the Department of Child and Family Services (DCFS). Marco’s three siblings denied accusations and Marco was about to turn 18; therefore the DCFS case was never opened. Throughout treatment, Marco was attending community college part-time and seeking employment. Marco had no contact with father and minimal contact with siblings. Marco never revealed his location to his family. At the beginning of treatment, Marco had been living at the TLP for five months and was following the program at a low to moderate level showcasing difficulties with motivation and limited independent living skills. The TLP program required all residents to meet weekly with a therapist.
Presenting Problem

Irregular sleeping pattern, scarce eating habits, and lack of motivation impaired Marco’s ability to look for a job and keep up with schoolwork. Marco reported feeling emotionally detached, neutral, and empty. Marco consistently had somatic complaints, such as headaches, stomach problems, backaches, and fatigue. Marco stated he had difficult time maintaining relationships and lacked interest in a social life. Marco possessed an extensive trauma history including: long-term physical and emotional abuse, and possibly neglect, within the care giving system; sexual abuse by mother’s boyfriend; abandonment by mother; neighborhood violence, including gang affiliation within the family system, sudden death of half sibling, and Marco being held up by knife-point. The notion that these traumas were likely an embedded aspect of Marco’s presenting problems was difficult to ignore.

Family History

Marco was born and raised in Los Angeles. Marco’s parents never married, but they lived together and had a total of four children. When Marco was six, his mother abruptly left his father and took Marco and his siblings to northern California. Marco stated he was not sure why his mother left, but he remembered his parents fighting a lot and knew his father had a lot of girlfriends. Marco revealed that he had over 25 half siblings and several family members were involved in a gang.

Marco lived with biological mother until age 13. All children were removed from that home due to Marco and his sister being sexually abused by his mother’s boyfriend. At that point, Marco’s father received legal custody of all four children and returned to Los Angeles.
Marco reported life with his father was chaotic. They moved often. At times the family lived with his father’s sister, her husband, and four children. Marco stated his father and aunt did not get along. Other times they lived with his father’s girlfriend, whom Marco referred to as stepmom, along with five half siblings. An addition to the family system occurred when Marco’s younger sister, age 13, had a baby boy.

Marco stated that he experienced “normal” discipline when he was young, such as getting hit with a belt. Verbal and physical abuse from his father intensified when Marco was 13, particularly when his older sister ran away because she was pregnant. Marco reported his sister returned after she had a miscarriage, but the abuse towards him continued. Marco recalled that his father kicked and punched him in the stomach and back often. Family conflict most often led to physical and verbal aggression. Age 13 was also when Marco came out as gay, but Marco felt that his sexuality had not played a role in his relationship with his father.

Marco’s mother’s location was unknown. He expressed an interest in reunification. Little information was revealed regarding extended family, with exception to Marco’s aunt, whom his family had lived with, and the recent death of Marco’s paternal grandmother. Marco stated he was not distressed about her death because he only met her twice. Marco was upset about his father’s reaction to the death, which was identified as “unemotional,” noting that his father had “not cried over her death.” Marco reported that substance abuse was not prevalent in his family’s history. Generational aspects of trauma were difficult to assess.

Medical and Psychiatric History

A recent examination by a medical doctor confirmed that Marco had no medical conditions of concern at this time. Additionally, Marco met with a psychiatrist and no formal
psychiatric diagnosis was determined. At that time, Marco was prescribed a sleep aid. Marco was not consistent with taking this medication.

Marco had a history of self-harming behavior in the form of cutting. Marco had suicidal thoughts three to four times in his past and was hospitalized one time.

Marco possessed a limited history participating in therapy. According to Marco, he had a therapist for a month at the TLP prior to the researcher.

_Mental Status Exam_

Marco was well groomed and appropriately dressed for the occasion wearing a T-shirt and jeans. Marco’s appearance was congruent with his age; however, he appeared thin for his height. Marco made eye contact often and posture was upright and somewhat rigid. Marco was friendly, attentive, and co-operative with the researcher. Marco was talkative and spoke quickly. Pronunciation was not always clear and speech was pressured at times. Content was logical and relevant. It was noticed that Marco often utilized hand gestures in conjunction with verbal communication, but there was no abnormal or repetitive motor activity detected. Marco was oriented to person, place, time, and situation. There was no evidence of delusions or hallucinations. Marco was alert and displayed good attention and concentration. Memory was intact and thought process was coherent. Marco demonstrated good judgment and understanding regarding current problems and displayed insight into his feelings and behaviors. Marco’s affect was restricted and mood was neutral. Marco denied suicidal ideation and thoughts to harm anyone else. Marco reported feeling safe at the TLP group home and had no safety concerns at this time.
**DSM-IV-TR Diagnosis**

Through the TLP program, a DSM diagnosis was not a requirement for Marco to engage in therapy. It was evident during the assessment process that severe mental illness was not of issue. A PTSD diagnosis was considered, but full PTSD symptomology was not evident in Marco’s presentation. Throughout treatment, the researcher remained attentive to PTSD, as well as symptoms associated with major depressive disorder, dysthymic disorder, and generalized anxiety disorder. However, a DSM diagnosis was never appropriated in Marco’s case.

**Dynamic Formulation**

In the act of running away, an immediate cutoff from Marco’s family system was created. The suddenness of this cutoff may have caused Marco’s anxiety-level to elevate, which in turn, could surface as sleeping disturbances and eating difficulties. This anxiety may have also produced concentration challenges that affect Marco’s ability to focus on school and search for a job. After running away, Marco was propelled into a new environment that contained unfamiliar people, new rules, and sudden expectations placed upon him. These novel pressures may also be a source of anxiety for Marco. In this new environment, Marco’s ability to differentiate may be hindered. Without being tied to his family of origin, the balance of togetherness and individuality was dramatically shifted. Perhaps for the first time, Marco was confronted with self-defining questions, such as, who am I without my family? What role do I perform in this new space?

The act of running away in itself propelled Marco into a life transition that may have produced anxiety, stress, and inner conflict. Marco’s extended trauma history must also be considered when formulating a hypothesis. Emotional detachment may have been a survival tactic and an effective way to cope with trauma. Over time, this defense mechanism built up so
strongly, that Marco’s ability to recognize and process emotions has become distant and buried within. There are several ways in which this may play out in Marco’s functioning. The most salient ways currently may be that relationships suffer with the lack of emotional connection and perhaps Marco’s somatic pain is actually tied to his emotional pain. Finally, underneath much of this, may even be that Marco is unconsciously playing out multigenerational transmission of trauma and/or family functioning making it even more difficult for Marco to differentiate.

*Treatment Goals*

Initial goals in treatment were identified by Marco that focused on behavior, such as stabilizing sleeping pattern with a 10 a.m. wake-up time and increasing daily food consumption from 0 balanced meals to 2 balanced meals per day. As treatment progressed, goals shifted to processing past trauma and addressing grief and loss issues that pertained to the loss of physical and emotional connection with family and saying good-bye to his childhood and old life as Marco transitioned into adulthood.

*Treatment Plan*

Early Phase: Establish rapport, identify level of differentiation, and improve communication skills.

Middle Phase: Address sources of anxiety, detriangle, increase differentiation, and initiate TF-CBT if appropriate.

Late Phase: Reconnect and resolve relationships, highlight ability to balance individuality and togetherness, and address grief and loss issues.

Termination Phase: Experience a healthy good-bye.
Session #1

Immediately upon entering the therapy space, Marco made direct eye contact and was attentive to the researcher. Marco’s hair was neatly pulled back into a ponytail and he was wearing a T-shirt and jeans. His affect was constricted and his mood was neutral. After a brief introduction, which included an explanation of the limits of confidentiality, mandated reporting, where the art would be kept, and the researcher’s role as a trainee in practicum, the art directive was introduced: Create a collage about yourself. This directive was given so Marco could selectively choose what he wanted to reveal about himself in the first session. The use of this art directive also signified that art was a central aspect of therapy and would be an integral mode of communication between Marco and the researcher.

Marco displayed no hesitation or lack of confidence regarding the art directive. He immediately reached for the collage box and placed it on his lap. Marco methodically and carefully flipped through each and every image in the collage box. He set aside images as he went. Marco then cut the images. After all images were precisely arranged on the page, Marco pasted them down. Marco worked in silence for about 30 minutes. The researcher noted how his process was organized, intentional, and focused.

Without any prompting, Marco turned the collage around so the researcher would have a proper view of the final piece and explained what the images symbolized for him (Figure 1). Marco spoke quickly and continuously, not allowing for any natural pauses for the researcher to ask questions. The abundance of verbalization contrasted significantly with Marco’s silent art process. Marco was insightful and articulate as he identified the meaning of the images. In the midst of talking about the artwork, Marco paused and stated, “I just realized I forgot a big one.” The researcher encouraged him to go ahead and add to the collage if he felt like something was
missing. Marco then added the little girl wearing the pink dance uniform and used a green marker for the Korean alphabet.

In the images, Marco identified the following: 1) He had a strong interest in Asian culture, specifically Korean (dragon and Korean alphabet; 2) He enjoyed dancing and cheering (little girl dancer); 3) There was an incongruence with his outward appearance and what’s really going on inside (colorful hair and crying child); 4) He strived for perfection (Botox needle in woman’s forehead); 5) There was confusion in his head (maze); 6) In high school he was popular for all the wrong reasons (human figure with turkey covering face); 7) and he has had many experiences with death and had no fear of death (the grim reaper). There were two images Marco struggled to explain, the man tied up and the female face with money around the neck.

Figure 1: Introductory Collage
Session #2

Because therapy was required of Marco in order to be a part of the TLP, the primary goal of this session was to assess Marco’s motivation for therapy, his understanding of what therapy was, and what he hoped from therapy.

Marco arrived to session on time and was dressed appropriately in a t-shirt and jeans. His affect was calm and mood was neutral. The researcher opened session by asking if there were any lingering thoughts about last week’s session. Marco reported that it had felt good to talk to someone and that he hadn’t had that in a long time.

The researcher transitioned to the art with the following prompt: *Fold this piece paper (11x17) in a way to create two sides of the page. On one side, make art about your past experience in therapy. On the other side, make art about what your hopes are for this therapy.* The way in which Marco comfortably used the collage material in the first session encouraged the researcher to provide more medium options for Marco, including markers, colored pencils, pastels, and the collage box, as a way to assess how Marco reacted to several options.

Marco immediately folded the piece of paper diagonally and then stated he wanted to use the collage images. He worked a little more quickly and less methodically compared to the first session. For example, Marco flipped through images at a faster pace, used the scissors to cut only a couple images, and spent less time placing images onto the page. Yet, his overall art process was quite similar to the first session: controlled and confident. He, again, worked in silence.

When Marco was finished the collage, he flipped it around so the researcher could view it. Marco waited for the researcher to instigate verbalization. The researcher stated how she had noticed that he focused on the top left diagonal first and asked what he was thinking about the most when he created that half (*figure 2*). Marco had a difficult time pinpointing what individual
images meant, but as he talked about the art and his past experience with therapy, three dominant themes emerged: 1) Repetition (blue dots and canned food). Marco explained that he had felt like he and his other therapist kept talking about the same stuff over and over with little progression (man pulling boat); 2) Incongruence between external and internal emotions (all the faces, but particularly the girl crying in the center of the page while girl to the left who was looking away.) Marco admitted that on the outside he was unable to show emotion, but on the inside he was feeling a lot; 3) Feeling overwhelmed with problems (surgery image). Marco articulated that it seemed like while one problem was being worked on, other problems just kept piling up.

Four themes emerged from the other side of the page, which represented what Marco hoped for therapy: 1) Freedom; 2) Desire to build something; 3) A place where emotions can be expressed; 4) Dreams. Marco explained that sometimes he had the same type of dream over and over and that he thought it held meaning.

Marco’s speech pattern was less pressured than it was the first session, but the researcher still noted how quickly Marco talked. The session was dominantly focused on the art; however, Marco brought up two noteworthy past events. Recently, Marco’s journal was stolen by a neighbor girl and then given to his father. His father read his journal. This violation of privacy was discussed briefly in session. Marco also made a statement about when he was younger his relationship with his father was good, but somewhere along the way it had changed. This was not further explored during this session due to time restraints.
Session #3

Last session, Marco stated his journal had been stolen by a neighbor and then given to and read by his father when he was 14. Due to this experience, the act of creating a safe place for his personal, inner thoughts was an important therapeutic intervention. The art directive was:

*Create/embellish a folder any way you wish. At the end of each session, you can place your artwork in this folder for privacy and safekeeping.*

Marco’s affect was bright throughout the session. Marco was comfortable and confident with the art making process as evidenced by his ability to immediately begin without prompting. A hole punch and yarn were used to create stitches around the sides and bottom of two pieces of poster board. Marco worked carefully. The entire session was focused on the stitching (figure 3). Marco expressed an interested to paint the folder another time.

**Figure 2: Past Therapy/Hopes for Therapy**
Marco was talkative as he worked. Flow was natural, but shifted often. There was lightness in the way Marco spoke, even when the topic was on the heavy side. Affect was incongruent at times. Topics included: 1) His father and sister, 2) Being shot at, 3) Searching for his birth mother, 4) His interest in Korea and a desire to live there by age 26, 5) Working at his father’s lock-smith shop without getting paid, 6) Thoughts about changing his last name, and 7) Missing places he never thought he would miss, like his house and the previous shelter he was at prior to the TLP.

At the end of session, Marco was provided with his art from the previous sessions to slide into the folder. Marco’s affect was happy as he retorted, “It all fits perfectly.” Marco then stated he had one more thing to do. With the artwork inside the folder, he then added four holes and used the yarn to create a complicated way to seal the folder at the very top. This addition made it so the folder was “locked.”

Figure 3: Stitched Folder
Session #4

Marco arrived to session and the researcher asked if he had anything he wanted to specifically focus on. Without hesitation, Marco stated he had a really bad dream the night before. The researcher asked if he thought doing art about the dream would be helpful. Marco was open to art so the researcher prompted an open-ended art directive: _Create an art piece about the dream._

Marco used a standard lead pencil and began drawing. This was the first time Marco chose to use pencil. As he drew, he spoke to the researcher about what he was drawing, which was a bedroom environment (figure 4). Marco explained that it was difficult for him to tell if it was a dream or not because, in the dream, he was laying on his bed in his current bedroom. The importance of drawing the environment exactly as Marco remembered it was evident in the way Marco talked through the placement of items and details included. Marco drew quickly with a light and sketchy line quality. Marco eventually went over it a second time with darker lines and added limited color. The color he added orange and blue. Marco explained that an orange light was coming from both the window and the closet. And a blue light was coming from the alarm clock. Marco added that there was this dark thing floating from the closet and moved really slowly around the room. When Marco completed the drawing, the researcher asked him to title the dream and write some words that described his feelings in the dream and/or after waking up from the dream. He titled the dream “blurth” and wrote several words on the back of the paper: “Scared, weak, vulnerable, shocked, motionless, and plain.”

Marco stated that this dream was different than his “typical bad dream.” Marco was encouraged to draw a “typical bad dream” as well (figure 5). His art process was repeated with this drawing: Sketchy and light, but then reinforced with darker lines and color. Environment
was, again, central focus of the drawing. The environment was the TLP living room with the television on and phone close by. When finished drawing, the researcher asked Marco where he was in the drawing, Marco pointed to the bottom of the page where two lines were drawn. He explained he was sitting on the couch and those were his legs sticking out. To the right of him were the other TLP residents sitting at the other couch and they were all watching TV together.

The researcher went back to the “blurth” drawing and asked Marco where he was in that drawing. Marco stated those were his legs sticking out at the bottom of the page as well.

Marco explained the “typical bad dream” drawing: He was watching television and a missing person’s report came up on the television, and he started panicking and yelling because the photograph of the missing person was his nephew (but sometimes his sister or his little brother). The telephone was important because he would pick up the phone and call his father and yell at him. The researcher then asked Marco to write down the types of things he would say to his father when on the phone. Marco wrote, “What did you do? Where are they? Why? Did you do this?” Marco titled this dream “The Unknown” and wrote the following feelings on the back: “Mad, terrified, chaotic, worried, shocked, panicky, and breathless.”

During the last part of the session, dreams were discussed in context to Marco’s current sleeping difficulties. Marco seldom went to bed prior to 4 a.m., which made it difficult for him to get up the following day. The researcher asked if dreams were so bad that he was afraid of going to sleep or made him avoid sleep. Marco stated, “no” but he acknowledged that sleeping was problematic for him. According to Marco, sleeping difficulties had been present on and off throughout his life. A time line of his sleeping patterns throughout his life was then started. The time line progressed into something bigger when Marco began adding elements, such as good dreams, bad dreams, good memories, bad memories, and times when he had moved.
Figure 4: “Blurth” Dream

Figure 5: “The Unknown” Dream
This session began as Marco reported he had not had any bad dreams since last session. When asked why he thought that was, Marco stated, “I’m not sure.” This led to a discussion about his sleeping pattern and medication. Marco acknowledged that his sleeping pattern negatively affected his functioning, specifically his motivation in his job search and school work. Marco explained that he was not taking the prescribed sleep aid because the cap was stuck. Marco confirmed that he wanted to develop a strategy to promote more consistency with his sleeping pattern.

Marco wanted to work on the time line started last session. As he examined the time line he determined that it was too cluttered. He then created a new time line that highlighted good and bad memories. Marco used pencil and mimicked the sleep time line configuration with six rows starting at age one and ending on “present.” Marco focused in on two bad memories; both involved his mother. Marco first talked about a memory when he was first learning how to tie his shoes and his mother, chastised him when he was unable to tie them. Marco’s affect became labile as he reflected on how, at the time it seemed normal, but now thinking back, it was really “messed up.” Marco then took a blue marker and made a dot on the timeline and then drew a shoelace.

As Marco transitioned verbally to the second memory from age five, the researcher prompted Marco to draw this memory (figure 6). Marco created the environment he remembered from this memory. Marco used pencil initially, but went over it with marker. The pencil marks were light; however, the lines became darker and more agitated when he drew the human figures. As Marco drew, he talked about the details of the situation, as well as the particular placement of items in the room. For example, Marco drew the refrigerator and then wrote the word “refrig”
and as he used the blue marker on the bed (back, left) he commented on how the bed had “really ugly blue sheets on it.” The memory was about Marco being blamed for stealing a wallet shaped like a monkey. The wallet was found behind the refrigerator. Most of the human figures had no facial features and stick bodies, but two figures had more detail, which Marco explained to be his father and mother. Marco drew his father with a full body sitting in a chair wearing a hat. In his right hand, he held a belt. Although this father figure contained more detail than the figures around him, the figure with the most detail was the mother figure. This figure was drawn very large in comparison to the other figures. This figure was also the only one with color and facial features. As Marco added details to the mother figure, he commented on how “beautiful” she was and then explained that “her hair was curly and she was wearing a nice brown shirt that day.” Marco added a small symbol of a monkey for this memory to the timeline.

When Marco was finished with the drawing, the researcher asked if Marco had drawn himself anywhere in the image. Marco pointed to the dark round object at the bottom edge of the page, which was the back of his head. Marco stated he drew himself that way because he felt “hidden and not seen.” The researcher then asked Marco if he could write the feelings that this memory evoked for him on the back. Marco wrote: “Scared, chaotic, cornered, pinned on, framed, lonely, and exposed.” Marco revealed that he often felt this way currently and brought up his recent experience at a department of child and family services (DCFS) court hearing and saw his father and siblings. Marco explained that he felt exposed and framed because his siblings and father denied abuse allegations.

Session ended with one final examination of the drawing. The researcher asked Marco if he had made any realizations as he drew it or looked at it now. Marco stated he noticed that his
mom was there, but she wasn’t really looking at him. He then said, “Everyone else was looking at me, but she was looking off … past me.”

Figure 6: Bad Memory
Session #6

Even though keeping a dream journal had never been discussed in therapy, Marco arrived to the session and stated he had kept a dream diary all week and wanted to review it. The researcher asked Marco if there was a particular dream that he wanted to make art about. Marco stated he would rather talk about it. But as Marco explained one dream, he quickly sketched a character in the dream (figure 7). Marco drew with a pencil very lightly. As he drew, he explained that this character had a television for a head and big feet. His nephew’s face was the television screen. In his dream, this character was seen on the street by the TLP house where Marco currently lived.

The researcher then proposed that it might be helpful to think about overall themes that appeared in the dreams. Marco thought for a moment and then stated that his nephew and siblings were often in his dreams, as well as his father. The researcher stated she had noticed that as well. Marco and the researcher then discussed how it seemed that Marco’s current environment at the TLP had popped up in his dreams often, too. Furthermore, emotional themes were also verbally highlighted, such as fear, chaos, terror, feeling frozen, and worry.

Marco displayed a strong ability to be insightful as he reflected upon how these dreams connected to his current life. Marco acknowledged that it was difficult to be living at the TLP and not knowing what was happening at home and he felt worried a lot. The researcher then prompted an art directive: *Make art about what it’s like for you to be away from his family.*

Because it had been observed that Marco’s art process was controlled, methodical, and contained, the researcher purposely guided Marco to utilize a more unstructured medium to promote a more spontaneous art process. The researcher informed Marco she had brought paint this time and asked if he would like to try them out for this directive. Marco agreed.
Overall painting style was structured and contained. Brush strokes were slow and purposeful, as was the mixing of colors. In contrast with the contained artistic style, Marco’s verbal expression was uncontained. Speech quality was rapid and flow of thought was loose in association, shifting often. Content was in regards to past art projects and art history classes, high school, cheerleading, past friendships, and past relationships. Regarding past relationships, Marco reflected on how he thought being in a relationship would be good for him, but relationships never lasted very long, Marco reported that relationships typically only lasted a couple months and all relationships had ended because he had cheated on his partner.

When art was completed, Marco explained the elements on the page in the order in which he painted them (figure 8). The light green element was a self-symbol. Marco described himself as being “neutral and flat.” The blue and dark green elements represented “the chaos around me.” When the researcher asked for an example of the “chaos,” Marco was unable concretize what the “chaos” actually was. Although the lines were curvy, the way in which Marco created the “chaos” was contained and careful. These elements touched one another, but each element was distinctly its own. While cool colors dominated the self-symbol and chaotic elements, warm colors were introduced in the final element Marco painted. Marco stated that this element was “hope” and placed away from everything else because it was something he “did not feel very often.” A textured quality was created as paint was layered using pinks, oranges, and yellows. Rather than a smooth line quality observed in the other elements, this element was made using short, choppy brush strokes. Marco spent the most time creating this element.

As session came to an end, Marco stated that an hour went by too quickly and he never felt like there was enough time.
Figure 7 (original): Television Character

Figure 7 (enhanced): Television Character
Session #7

With supervisor’s guidance, it was determined that extending therapy to two times per week was an option to offer to Marco. However, due to scheduling conflicts, an extended weekly session up to an hour and a half was offered instead. Supervisor encouraged the researcher to explore why Marco felt like there was not enough time and how would more time be beneficial for him. Delving into how Marco was experiencing therapy was the primary goal for this session.

The researcher began the session with an art directive: *What does having more time in this space mean for you?*
Marco asked if he could use the collage images. The researcher handed him the collage box. Marco was silent while making the collage. Affect was constricted within a normal range. He flipped methodically through all the images in the box, as well as an envelope that contained words. By the time Marco had gone through all the images and words, there were a lot of images and words set aside in a pile. Marco proceeded to glue and placed the images onto the page. He worked at a quicker pace for this part. Marco filled the page edge to edge with images leaving very little white space. Words were then placed on top of the images.

When collage was finished (figure 9a), it was noticed that Marco had not instigated the transition to talk about the art, something he typically had done in previous sessions. The researcher began the discussion by asking Marco about his overall process of making the collage. Marco stated it was “frustrating.” He specified that when he looked at all the images and words in the pile, he was not sure what to do with them. But once he started placing images on the page, he figured out what to do.

Marco then explained the concept of the piece. The interior of the collage pertained to where Marco wanted to be and was illustrated by the “wish you were here …” image in the very center of the page and the words, “growth, solution, idea, wish, explore, experiment, future, support, should be.” Images and words on the outside represented barriers. Specific barriers Marco highlighted were chaos, masking emotions, sisters/brothers, time, and lack of friends.

As the discussion unfolded, Marco also revealed a myriad significant pieces of information: 1) He wanted to get a nose job eventually because his nose reminded him of his father (self-image theme), 2) Father and brothers were in a gang (chaos theme), 3) His sibling were not aware he was at a TLP; rather, he told them he had two jobs, was really happy, and had
an apartment (brothers/sisters theme), 4) He had not known he had any strengths until he had come to the TLP.

As the art was further investigated, a self-symbol emerged from the butterfly image placed at the top of the page (figure 9b). Marco stated that the butterfly represented how he felt: “shattered, a bunch of pieces all over the place, and stuck.” Through the butterfly self-symbol a metaphorical way to talk about goals in therapy emerged: What would help this butterfly become whole/unstuck again? As a way to solidify client-centered goals, Marco wrote a list outlining goals and titled it “The Hopeful Butterfly.” As for goals, Marco wrote in one column: “Family, Friends, Emotions, Future, Self-Image.” And in another column: “Behavior adjustments, eating, sleeping.” Marco stated he felt like his sleeping was getting better and that he wanted to focus on his eating next. Session ended at the hour and a half mark. Marco stated that the hour and a half felt better and wanted to proceed with the longer session each week.
Session #8

The primary goal this session was to explore Marco’s eating habits and his relationship with food. The art directive was given early on in the session: *What was a typical meal growing up versus a typical meal now?* Marco was given many options for material, such as collage, paint, markers, colored pencils, and pastels. Marco stated he knew exactly what to draw and chose markers.

Marco first drew a typical meal from childhood: A cereal box, bowl of cereal, cup of steaming noodles, and a coca-cola bottle (figure 10). Dominant colors used were red and black. The cereal box was large and detailed. The coca-cola bottle was filled in with solid black with red label and cap. Line quality was, for the most part, smooth and steady. As Marco drew the meal, he talked about the lack of food in the house, but there was always cereal. He reflected upon how he ate alone whenever he wanted and that eating meals as a family never happened. Marco mentioned that his family ate a lot of fast food since his mother rarely cooked.

Marco’s second drawing depicted Chinese food in a Styrofoam container and a bottle of water (figure 11). Marco used more color in this drawing. When Marco added the green to the
Chinese food, he explained that he was trying to eat healthier. Marco talked about switching the soda for water when he moved to the TLP.

When both drawings were examined side by side, Marco noticed that variety was missing from both drawings. Additional similarities he noted were: Eating alone, lack of food preparation, and a lack of schedule regarding mealtimes. Differences were also discussed, particularly the soda bottle that changed to a water bottle and Marco’s conscious desire to obtain healthier eating habits. When the researcher asked Marco what his biggest concern was in regards to his eating, Marco replied he was concerned that even if there was food to eat, and he was hungry, he sometimes still would not eat. Marco was not sure why he would not eat. The researcher then asked Marco if there were any body image concerns and/or if he thought he was anorexic. Marco stated that, other than trying to gain a little weight, there were no body image issues and that he was not anorexic.

Figure 10: Typical Meal from Childhood
In continuation from the previous session, this session remained focused on Marco’s eating habits and relationship with food. Marco’s consistent involvement and motivation in therapy remained active and high. Marco arrived to session ready to engage with the art. The researcher began the session with a discussion about the process of looking at the art again after a break from it and how, sometimes, it may reveal new things not noticed before. The two drawings from last week were displayed (figure 10 and 11) and the researcher asked if there was anything that stood out. Marco instantly recognized that he had drawn a line for a table for the food to sit on in the childhood meal, but not in the current meal. The researcher asked if there was any significance to that difference. Marco’s affect brightened as he explained that it made so
much sense that he drew the line on one but not the other, but he was not aware of it last week. Marco then talked about how he ate cereal at a little table when he was a kid, but now he ate food while sitting on the couch.

Next a solution-focused art directive was given: *Make an art piece about your ideal meal.* Think about the food you would want to be eating, and also think about the environment you’re in and who you’re with. Marco sat a moment, and then started drawing with a pencil. Marco’s typical drawing style emerged; light, sketchy and quick. Once Marco sketched a few elements such as the table, the people, and some of the food elements, he used colored pencil (figure 12). Marco spent the majority of the time drawing and coloring the food items on the table. Marco added the color green for “healthy” food. Much of the food was described as just food, except for the turkey, the salad, spaghetti and meatballs, and the water, juice, and wine beverages. Many details were added, such as utensils, beverages, and food on individual plates. Marco almost forgot to draw food on his own plate. Marco identified himself sitting at the head of the table (bottom of the page). Comparatively, Marco’s head and plate of food was drawn much larger than others on the page. While details were apparent with the food, the people at the table lacked detail. Facial features were absent as well as hands. Marco was unable to articulate who the people were in the drawing. He explained that some people were talking to each other while others were watching the television. The television and the flowers were the last elements Marco added to the environment.

Marco stated that when he was drawing the ideal meal, it was not based on a real experience. However, through discussion, he realized that the scenario he drew was similar to Thanksgiving dinner last year when he spent the day with a friend’s family.
**Session #10**

During this session, Marco returned to his folder and painted one side of it gold (figure 13). Marco was meticulous while painting and went all the way to the edge and even under the yarn that bound the folder together. Marco went over some spots with a second coat. Marco was talkative but focused in on a particular experience he had in high school involving a crush he had on another a male peer. This male peer was straight, but Marco developed very strong feelings for this person. Marco reflected on how he regretted writing and giving this person a poem that was supposed to remain a secret, but didn’t. Marco expanded on feelings or sadness and humiliation during this time, as well as behaviors. At one point Marco stated, “I didn’t eat for
83 days after he found out I wrote the poem.” Marco reported continued feelings for this person, but tried not to think about it and hid his feelings.

Since Marco’s goal in therapy pertained to eating habits, the researcher connected the second art directive to Marco’s comment about not eating for days. The researcher directed: *Use the paint and make an art piece about the feelings he experiences when he doesn’t eat.*

Marco began by mixing black and blue paint and created an abstract blue shape (figure 14). The researcher noticed how Marco’s demeanor had shifted from earlier when he was painting the gold folder. He was now silent and affect was sad. Marco then mixed more paints: black with red and black with purple. Marco continued with the painting using the red and purple mixtures. Although Marco painted in a controlled way, there was an aggressive way in which the brush strokes were created. The last element painted was the black sun-like element.

What Marco verbally expressed were emotions associated with the colors. Marco stated the blue and purple represented sadness, the red anger, and the black a deep anger.

![Gold Folder](image1)

**Figure 13:** Gold Folder
**Figure 14:** Feelings Related to Not Eating

**Session #11**

Because there was not very much time to examine and discuss the painting from last session (figure 14), the researcher took the art piece out of Marco’s folder and asked him what he thought about the piece when he looked at it now. Marco stated, “Looking at it now, I don’t feel like this right now mentally, but physically I do.” Marco specified physical ailments of fatigue, a headache, stomachache, and his back hurting. The researcher gently guided Marco to focus back into the emotionality of the painting and asked if the colors still held similar meanings for him this week. Marco’s description of the emotions slightly shifted as he spoke about sadness, insecurity, anger, and hidden anger. When asked what the difference between anger and hidden anger was, Marco specified that the hidden anger was deeper and always there. Marco was not sure how the deep anger got there nor how the deep anger affected him. The researcher brought attention to how anger may manifest in different ways and, for some, anger
may be displayed outwardly towards other people, and for others, anger may be displayed inwardly towards self. Marco then revealed details about self-harming behaviors when he was about thirteen. He stated that he started by cutting his arms, but it was too visible, so he began cutting the back of his legs. Marco admitted he was also hospitalized one time for being suicidal around this same time, but Marco did not divulge details. The researcher asked Marco what was going on during this time when he was cutting and Marco explained that this was when he first came out as gay and his father became more physically and emotionally abusive. Despite Marco’s father’s increased physical abuse during Marco’s cutting episode, Marco did not correlate it with coming out as gay.

During the last part of session, Marco worked on his folder again. Using pencil, he made circles to make a bear’s face. He painted the eyes black. As he worked, Marco talked about how he’d like to start writing in a journal again. As session concluded, Marco asked if he could finish painting the bear’s face over the weekend (figure 15). The researcher let Marco borrow the paints he needed (black and white) and a paintbrush.

![Figure 15: Bear Folder](image)
Session #12

During the week, in the milieu environment, Marco informed the researcher that he had gotten a job at a clothing store. For this session, the researcher strove to provide a space for Marco to reflect on all his hard work he put into his job search the past several months and what it was like to get a job. The art directive given was: *Why do you think you got the job?*

Marco picked up the piece of paper (11x17) and folded it in half. He then turned his attention to the collage box. Marco looked through the images at a steady, quick pace. Marco set aside eight images. He glued the image with bright orange and red colors where the man was looking up at the woman. This image was large and took up half of the page. He then positioned the gold balloons and glued it down. He proceeded to cut several of the images into shapes. However, one image Marco tore. He glued the images into place. Marco then looked through the envelope of words and quickly selected three: end, mood, and whatever. Marco was quiet as he created the collage, but was talkative once he was finished with the art piece (figure 16).

As Marco explained the images and reasons why he included them on the collage, it was noticed that he was not focused on reasons why he got the job. Marco was focused on his thoughts and feelings about getting a job. Marco first explained that the balloons represented feeling happy when he first found out he got the job. He claimed he had celebrated for about a day, but “no one was around to celebrate with me.”

Marco was most concerned about not being stylish enough for the job. Marco explained that he was afraid people would notice he wore the same button down shirt every time he was at work. In the collage, this concern about style was represented by images of women. In fact, women were a dominating presence in the collage. When the researcher asked why he had selected these particular women, Marco explained that they all looked very stylish to him.
Another concern revealed by Marco was symbolized by the image of flamingos. “They all look the same” was how Marco described the flamingos. Marco related this to all the employees and how he was just one of them. He felt as if he blended in with everyone else who worked there.

The researcher specifically asked about image in the left lower corner of the page. Marco brought up that he purposely had torn those edges rather than cut it nicely like the others. The torn quality of the image coincided with the word, “whatever.” Marco then stated that he “really didn’t care that he got the job.”

The researcher reflected to Marco how this art piece looked very full and how it communicated a lot. The researcher then asked if there was anything in the piece that communicated something about his own strength and ability to get hired. Marco reported that the word “mood” was put on the page because he believed his “happy mood” helped him get the job. Interestingly, the word was positioned above an image of a crying elderly woman.

At the very end of session, seemingly out of the blue, Marco made a comment about a repressed memory that had emerged at the end of a session a few weeks ago. Marco stated he remembered being sexually abused by his older half brother when he was about five years old and another memory of sexual abuse from when he was three years old, but he was not sure who it was. He explained that it was either the same half brother or his dead half brother, but they both looked alike so he doesn’t know which one it was. The researcher asked Marco if the sexual abuse had ever been reported. He stated, “No, I don’t think so.” The researcher was aware that this half brother was ten years older and had young children of his own. The researcher spoke to Marco about the importance of reporting child abuse and reminded him of the researcher’s role.
as a mandated reporter. The researcher then asked Marco if it was okay to involve his case manager, whom Marco was close to. Marco agreed.

As the case manager joined the session, the researcher supported Marco as he explained what he had remembered. The case manager was empathetic and also explained the necessity to report the abuse. The case manager initiated a discussion about whether or not this was something Marco wanted to report himself. This was initiated in such a way that empowered Marco, regardless of what his decision would be. Marco decided he would make the report himself. The researcher and the case manager remained with Marco as he made the call. Marco did not have enough information regarding perpetrator, and the case was not opened at this time.

**Figure 16: Getting a Job**
Sessions #13

This was the last scheduled session prior to a three-week holiday break. Because this break signified the mid-way point of Marco’s therapy, reviewing the artwork and examining the therapeutic process up to this point deemed appropriate. The researcher and Marco decided to meet on the porch area that provided more space to view the art.

Before delving into the artwork, the researcher asked Marco if he wanted to talk about what it was like for him to call the abuse hotline and/or anything about the repressed memory. Marco stated he had not called the hotline back because he had not asked for the address from his sister. Marco then shared that his memory of the sexual abuse helped him “piece some things together.” As an example, Marco explained that his half brother’s behavior made more sense now. Marco did not specify more details beyond that.

The session then transitioned to the topic about the upcoming break and a reminder that this was the midway point of therapy. The researcher asked what Marco thought about that and Marco stated he felt therapy was helpful and productive so far. The researcher commented on how he had not missed a session, and commended him on his hard work, consistency, and motivation in therapy. The researcher highlighted that one benefit of art therapy was how the artwork could be used to examine progress, themes, areas that need further exploration, what sessions stood out for him, etc. Marco was interested in seeing all the artwork and helped spread it all out.

The first comment from Marco was “I thought there would be more.” When asked “why?” Marco was unsure. Marco was encouraged to simply look at the art for a little while without saying anything, or if something came up to verbalize it. Marco stated he noticed he used a lot of collage images and he identified “chaos” as a theme. The researcher asked Marco if there
were any art pieces that he wanted to expand on or spend more time on. Marco replied that he felt like all the pieces were finished. The researcher assessed that it was important, while looking at the art, to evaluate Marco’s goals for the second half of therapy. The researcher reflected that there were several art pieces about sleeping, dreams, and eating and wondered how Marco was feeling regarding those early-identified goals. Marco reported that he felt like he had made a lot of progress in those areas and wanted to focus on “family” next. He stated that even though he was away from family, he understood that they still affected him.

Session #14

Although session 13 was supposed to be our last session prior to the holiday break, the case manager asked me to check in with Marco. As a result, an impromptu session emerged. Although art making was offered to Marco, art was not created during this session. Rather, Marco wanted to talk about a new resident who was going to move in and become his new roommate. Marco processed his anxiety and concern about this new roommate.

THREE-WEEK BREAK

Session #15

Due to Marco’s trauma history associated with family members, the researcher introduced the concept of controlled breathing. Marco was receptive to learning about controlled breathing and participated in breathing exercises at the beginning and end of session. He reported liking the effects of the breathing exercises and thought it was a good idea to incorporate into the sessions.
Marco was talkative throughout the session and was enthusiastic regarding a recent paper he wrote for his English class about being abused, running away, becoming homeless, and now living at the TLP. As Marco discussed the paper, he reflected on how he felt like he had a better understanding about what happened to him and why his father treated him the way he did. Art was introduced as a way to process further and expand upon the new found understanding: 

*Create an art piece about what you learned while writing the paper.*

Without hesitation, Marco chose to use collage material, and he stated he had an idea about what to do. The researcher noticed that Marco’s typical collage-making process had noticeably shifted. Instead of carefully going through each image in the box, thoughtfully selecting images, and gluing images down only after arranging them in a particular way, Marco randomly grabbed the images and glued them on the page seemingly in a haphazard manner (figure 17).

Marco was cognizant about the shift in his collage making and explained it was necessary because the idea for the art piece called for “randomness.” Marco spoke about the “chaotic and crazy” aspect of the art piece and how it “flowed into something more simple.” Marco further explained that the left side of the collage represented life before running away and how it “was a bad book that did not flow,” but the right side was simpler and represented the TLP. According to Marco, the phrase “support right here, each moment” was included in the collage because he felt supported by the TLP in every aspect of his life, “if I had not run away, I would not have gotten to this part” (referring to the right side of the collage).

Although Marco spoke about randomness while choosing images, he reflected on possible meanings regarding specific images. Marco thought that each image could represent a different story in his life. He pointed to an image of a silhouette of a boy that reminded him of
his nephew, a rose image that reminded him of his mom, and an eagle that could represent him running away. The researcher asked Marco if there was an image that reminded him of his father. Marco’s affect suddenly was incongruent with the seriousness of his mood. Marco laughed for a moment and then pointed to the feet sticking out at the bottom of the page, “I’m not sure why, but the feet remind me of my father.” The researcher asked Marco if he remembered what the rest of the image looked like prior to covering it up. Marco remembered it was a man taped to a wall. The researcher pointed out that it was one of the first images Marco glued down and then covered up by other images. The researcher asked Marco what he thought about that. Marco replied, “I know my father is there, but I don’t want to see him.” Marco then took the glue stick and re-glued the edges of an image that was on top of the taped man image.

Marco changed topics and started talking about the rose image that reminded him of an experience with his mother. Family dynamics were discussed as Marco quickly sketched a memory of a photograph of himself and his three siblings (figure 18). Pencil marks were very light. Marco focused in on the gap between himself and his three siblings. Although Marco was observing a physical gap, Marco delved deeper into the emotional meaning of this “gap.”
Figure 17: What Was Learned

Figure 18 (original): Sibling Photo  
Figure 18 (enhanced): Sibling Photo
Session #16

Marco made an active decision to move the therapy location outside on the porch due to the heat and sun in the therapy room. Session began with breathing exercises. Marco stated he really liked starting session like that. Marco’s affect was bright and mood was happy. Although Marco verbalized feeling really good today/this week, he was unable to specify a reason. Some time was spent on this moment to reflect on how he could tell he was feeling well. Marco spoke about sleeping better and physically feeling better.

Marco transitioned the topic to one about changing his hair color to blond. Marco initially focused on whether he should do it or not do it. The researcher shifted the focus to be more about what the change would represent for him and why now? It was concluded that it was a transition for Marco and it was symbolic for moving forward and leaving his old self behind. At this point an art directive was presented that correlated with the current discussion: Create three symbols, the past, present, and future. Colored paper was presented as well as oil and chalk pastels. Marco reacted enthusiastically to the art and chose the chalk pastels.

Marco chose different colored paper for each symbol. An explanation regarding color choice was given after the art was created. The orange (past) represented “innocence.” The green (present) represented “neutral.” And the red (future) represented “energy.” Marco first created a yellow sun symbol for the future symbol (figure 19). The theme that emerged for Marco was that this particular symbol represented “hope.” Next Marco worked on the present symbol (figure 20). Although Marco spoke about the green paper as being “neutral,” he spent the longest time working on this symbol. The complexity of this symbol emerged when Marco and the researcher talked about how it seemed like there were three symbols embedded into this one symbol (the bare tree, the tree with leaves, and the flowers.) Marco explained that the tree with
leaves represented “growth” and the bare tree represented “where I used to be.” The researcher asked about the flowers. Marco stated, “Oh, those are like feelings. Kinda small and not noticeable.” Yet the flowers were bright orange and red and quite large. Marco worked on the symbol for his past last (figure 21). Marco commented that he was not sure what to make. This symbol ended up being the most abstract of the three. Furthermore, Marco displayed a difficult time verbalizing the meaning behind this symbol. Marco described it as being “chaotic.” Even though Marco described it as chaotic, the artwork was made in a controlled way.

Towards the end of session, the researcher asked Marco to think about what his hopes were in therapy as the focus shifted to family. Marco first made a list of what he would want to focus on: “Abuse, mistreat[ment], unfair[ness], runaway, dad, brothers, family, and mom.” Underneath each topic, he wrote what his hopes were. “Deal” (“deal with it” was how Marco talked about it) was written under abuse and mistreatment. When discussed further Marco concluded that “finding closure” was embedded with the notion of dealing with it. “Understand” was written under “unfairness, dad, brothers, and family.” “Find” was written underneath “mom.” Finally, Marco made a line under “runaway” and stated that he felt he already understood why he ran away and was not something he felt he needed to focus on in therapy. Marco placed a star next to “brothers,” which signified what he felt was the most important topic for him currently.
Figure 19: Future Symbol

Figure 20: Present Symbol
Session #17

Session began with controlled breathing exercises. In the previous session, Marco indicated that he wanted to focus on his brothers in therapy. The researcher directed Marco to talk more about his brothers and his relationship with them. Marco identified two half brothers and the researcher gave an art directive: *Create a symbol for each half brother*. 

Marco asked for plain white paper and a regular pencil. Marco created a sun-like image with exaggerated, but smooth spikes *(figure 22)*. Marco then made a similar symbol for the second half brother *(figure 23)*. The line quality of this sun was darker and with rough-looking spikes. This sun image was created in a more agitated way and quicker. 

Although these were half brothers, Marco used the term “brother” throughout the session. Marco explained that the symbols represented outward and inward qualities of the brothers. In

![Figure 21: Past Symbol](image)
the first symbol, the smooth spikes represented an outward façade of “goodness.” Marco pointed to the inside of this symbol where there was a small dark dot. The dark dot represented “darkness, meanness, and cruelness.” Marco explained that the other symbol possessed an outward façade of “badness,” but instead of a dark dot on the inside, there was a white dot that represented “goodness.” Marco felt that one brother’s inner self was bad and the other was good.

In further discussion, it was revealed that both brothers had sexually abused Marco. Sexual abuse by one half brother was rather recent, between ages 15 and 17. This half brother was currently in his mid-thirties. The symbol that correlated with this half brother was the smooth-spiked sun. The other brother, represented by the agitated-spiked sun, was explained as the one who sexually abused him when he was five. The researcher confirmed that this was the half brother Marco had called the child abuse hotline for in session #12. The researcher then asked if the sexual abuse from ages 15 to 17 had ever been reported. It had not been reported. Although Marco chose to call the hotline during session #12, Marco was fearful to call the hotline for the most recent abuse. The researcher reminded Marco of her role as a mandated reporter. The researcher asked Marco if it would be okay if the case manager came in for extra support, like last time a reportable event surfaced. Marco stated he thought that would be good.

With the case manager present, it was discovered that Marco’s fear to report stemmed from gang retaliation within the family system. Marco was unwilling to reveal any additional information, such as the name of his half brother or where he lived. It was determined that the researcher would make the report. The researcher made the report, but it was not taken due to lack of information.
Note: Yellow square covers up identifying information

**Figure 22:** Symbol for Half Brother #1

**Figure 23:** Symbol for Half Brother #2
Session #18

With guidance from clinical supervisor and art therapy supervisor, Trauma Focused-Cognitive Behavioral Therapy (TF-CBT) was a potential direction to go. The researcher was encouraged to discuss TF-CBT with Marco. The majority of this session was focused on psycho-education about trauma and TF-CBT. The concept of the CBT triangle (thoughts, feelings, behaviors) was introduced. Marco focused on a “boiling” sensation he had felt in his body that arose last session when he realized a child abuse report was going to be made by the researcher. Marco connected his thought of “danger” to a boiling feeling that started in his stomach and chest and moved throughout his body. Marco was able to further define his feelings: distressed, boiling, tense, fearful, and panicky. Subsequent behavior identified by Marco was that he had taken a bath and smoked a cigarette after last session.

Marco communicated that he was interested in going the TF-CBT route in therapy. Possible benefits and challenges were further discussed, as well as more specifics on the TF-CBT process. Marco was encouraged to continue thinking about it throughout the week since a final determination was not necessary during the session.

Session #19

Marco displayed continued interest in TF-CBT. Self-care was introduced as an important element of the TF-CBT process. Marco made an art piece about self-care and asked if he could take it with him and hang it up in his bedroom. The researcher concluded that daily reminders of self-care would be beneficial for Marco and allowed him to keep the art. A calendar was examined as a way to discuss time management and expectations moving forward. Rather than the extended hour and a half sessions, it was determined that hour-long sessions may be more
appropriate due to the intensity of TF-CBT. Lastly, Marco announced that the most distressful trauma event he wanted to focus on was the sexual abuse that started when he was 15, and that he would like the witness to be his case manager.

Session #20

Controlled breathing began the session. Marco re-affirmed that he was ready to start the narrative. The researcher and Marco discussed how he wanted to represent the narrative. Marco stated he was mostly interested in writing with pencil on lined paper, but would figure out how to incorporate art as he went. Even though the most distressful event would ultimately be the primary focus, the researcher encouraged Marco to start his narrative any way he wanted.

Marco wrote in silence, but every now and then he paused and verbalized a new realization. For example, in the midst of writing, Marco informed the researcher that he had just realized when he lived with his mother he got help with his homework, and he never used swear words, but when he moved in with his father, no one helped him with homework and his half siblings swore all the time, so he started to swear. Another realization was his half siblings thought they were better than him because they had a mother and he didn’t.

Marco was prompted to read what he had written out loud. The writing highlighted Marco’s transition from living with his mother to living with his father, as well as a detailed description of the first time Marco’s father became more abusive (shifted from spanking to aggressively hitting, punching, and kicking).

After reading aloud, Marco stated he wanted to draw the scene he remembered right before his father came inside the house to beat him up (figure 24). Marco chose an 8.5x11 piece of paper. As he was drawing, Marco explained that this was what he saw out the window. Marco
first drew the scene lightly with pencil and then went over it with colored pencil. Marco was concerned about accuracy of the details and placement of objects. When drawing was completed, Marco made a comment that the truck was not in the exact spot, rather it should be moved to the left more. Session closed after a few minutes of controlled breathing.

Figure 24: Father’s Physical Abuse
Sessions #21 thru #25

After writing and making art about his father’s physical abuse in session #20, Marco transitioned directly to the most distressing event. The first time his half brother sexually abused him at age 15 was detailed in both the narrative and the artwork throughout these sessions.

The first piece of art Marco created (figure 25) possessed a small circular yellow interior space surrounded by dark black lines. The art was explained as what the light looked like at night when the sexual abuse occurred. Secondary symbolism was explained as his sister-in-law’s (the abuser’s wife whom Marco was close to) happy face that opened the door after the abuse occurred. His sister-in-law asked what was wrong after seeing that Marco had been crying. Marco further explained that he had to lie and say that he was upset with his father.

The second piece of art Marco created (figure 26) was the room where the sexual abuse occurred. Marco expanded on the art piece as he expanded on the written portion of the narrative (figures 26–30).

As a way for Marco to keep track of the weeks left in therapy, the researcher had Marco pre-select patterned paper that coincided with how many weeks were left of therapy. Building on the metaphor of “the shattered butterfly” (figure 9b) that emerged in session 7, each week, Marco created another piece of the butterfly and added to the image (figure 31). The act of assembling the butterfly was meant to provide integration and healing of the trauma. As therapy came to an end, it also symbolized Marco’s growth, change, and transition.
Figure 25: Memory of Light

Figure 26 (enhanced): Room Sexual Abuse Occurred In — Page 1
Figure 27 (enhanced): Room Expanded — Page 2
Figure 30 (enhanced): Room (Taped Together) — Pages 1, 2, 3, and 4

Figure 31: Butterfly Progression
Analysis of Data

Introduction

This section outlines connections, patterns, and themes discovered during the analysis process. During the analysis phase, the researcher examined Marco’s artwork and clinical case notes, in chronological order and gained a broad perspective on the data gathered. Through this process, four major themes emerged: 1) Controlled chaos, 2) emotional flooding, 3) the color yellow, and 4) covered faces, absence of facial features, and fragmented bodies. These four themes are discussed at the beginning of this section.

After these four themes were identified, the researcher investigated additional themes based on three distinct art groupings: Collage pieces (group 1), representational drawings (group 2), and abstract imagery (group 3). The middle part of this section expands upon these distinct art groups and themes that emerged.

Once themes were visible, the researcher then focused on the study questions proposed prior to collecting and analyzing data. In the last part of this section, the researcher answers the study questions based on what was learned during the data analysis phase.

Controlled Chaos

The theme of chaos versus control was one of the most emergent and universal themes throughout Marco’s treatment that was observed in the artwork, the art process, and verbal expression. Marco often used the word “chaotic” to describe his past, his feelings, and his artwork. During the assessment phase, Marco reported life with his father was chaotic. When writing feelings on the back of art pieces, the word “chaotic” showed up in connection with “The
Unknown” dream (figure 5) and his bad memory (figure 6). Marco also described the blue and dark green elements (figure 8) represented “the chaos around me.” When the collage about having more time in therapy (figure 9a) was discussed, a specific barrier Marco highlighted was chaos. Lastly, “chaotic and crazy” was the way in which Marco spoke about the collage he made in session 15 (figure 17), as well as in session 16 when discussing the past symbol created (figure 21). Overall, Marco’s use of the word “chaotic” surfaced often and spanned over time.

Despite Marco’s verbal expression of “chaos,” the researcher noted how Marco’s art process was incongruent with the concept of “chaos.” The way in which Marco created art was controlled, meticulous, thoughtful, time-consuming, and methodical. Elements that were described as chaotic, such as the painted swirls in figure 8, aesthetically looked controlled and rigid. Additionally, despite the loose medium used, Marco’s brush strokes were controlled and careful. As with the collage pieces (figures 1, 2, 9a, 16, and 17), the significant amount of imagery used could be interpreted as possessing a chaotic-like feeling; however, Marco’s process was controlled and contained. The folder created by Marco also exemplified the theme of controlled chaos. The act of stitching the seams and working on it over time demonstrated a strong desire for containing the “chaotic” art pieces, as Marco would describe them.

Throughout the span of treatment, the researcher never witnessed Marco’s art process deviate from a controlled and methodical nature. The theme of controlled chaos was so relevant during data analysis, that the researcher noted how other themes circled back to this theme.

Emotional Flooding

Another theme that surfaced with examination of Marco’s presence in the therapy room and artwork was emotional flooding. In the majority of sessions, Marco’s speech pattern was
pressed and delivered in a quick manner. Flow of content meandered and shifted often. Often times, the researcher felt inundated with information and a lack of containment from Marco’s verbal expressions and non-verbal cues, such as hand gesturing. This pattern could be correlated with anxiety, but this pattern could also be indicative of emotional flooding. Due to Marco’s cutoff from his family and many of his high school friends, Marco lacked relationships in his new environment at the TLP. The therapeutic relationship may have been the primary relationship that supplied Marco with the space, time, and attention for him to release emotions.

When making art, Marco typically filled the entire page. The best examples were figures 1, 9a, 14, 16, and 25. The researcher also noted how many collage images Marco fit onto one page. Interestingly, even though there was ample evidence of emotional flooding, Marco almost always contained the artwork to a single page. Marco’s ability to contain the artwork (control) in conjunction with un-containment (flooding), directly correlated back to the first theme outlined, controlled chaos. The two exceptions were: 1) Marco’s introductory collage (figure 1) with the money around woman’s neck placed off the page and 2) The drawings that were created while writing his trauma narrative (figures 26–30), which expanded to multiple pages.

The Color Yellow

Another pattern that emerged in Marco’s artwork was the appearance of the color yellow. The first observation of yellow occurred in the collage created in the second session (figure 2). The phrase “good day” had a yellow background, as well as the builder image. Both were placed on the half the represented Marco’s hopes for therapy. The use of the color yellow with a description of “hope” was noted in three additional art pieces. In session 6, Marco painted a symbol of hope that was yellow (figure 8). The butterfly that emerged as a self-symbol (figure
was labeled “The Hopeful Butterfly.” And, finally, the future symbol (figure 19) was also yellow and verbalized as representing “hope.”

Possibly the most obvious use of yellow was seen when Marco painted the large, stitched folder yellow (figure 13). Marco used the color yellow to create the bear icon that was explained as an image from Korean pop culture (figure 15).

The researcher also noticed the color yellow in six additional art pieces. In two pieces, the color yellow depicted a light bulb. One was representational (figure 6) and the other was abstract (figure 25). Marco’s nephew was connected to the color yellow in two separate pieces. The first was in “The Unknown” dream drawing (figure 5) where his nephew was televised as a missing person. Marco outlined the missing person photo with yellow. The second was in the collage created in session 15 (figure 17). Marco stated that the yellow image with the face profile reminded him of his nephew. Last two pieces yellow was noted in was in the balloons in the collage about Marco getting a job (figure 16) and the yellow fence in the drawing about physical abuse (figure 24). Whether Marco was consciously or unconsciously choosing to use the color yellow, it emerged consistently in his artwork. So much so, it became a noticeable and noteworthy theme to highlight.

Covered Faces, Absence of Facial Features, and Fragmented Bodies

The last major theme that became apparent as the researcher examined Marco’s artwork was covered faces, absence of facial features, and fragmented bodies. This was noticed in several collage pieces, as well as several representational drawings. Fragmentation was highly visible in the way Marco drew himself in four of the drawings (figures 4, 5, 6, and 12). Marco drew the back of his head or his legs sticking out at the bottom of the page as if Marco was floating
outside of his own body. Fragmentation of bodies was also apparent in the ideal meal drawing (figure 12). Despite all the details added, particularly to the food and elements on the table, hands were excluded. This drawing also highlighted the absence of facial features, as did the bad memory drawing (figure 6), the sibling drawing (figure 18), “The Unknown” dream drawing (figure 5), and even noticed in two collage pieces: 1) The yellow image of a profile that reminded Marco of his nephew (figure 17) and 2) the four images of the man exercising in the collage about having more time in therapy (figure 9a).

Cutoff or covered up faces appeared in Marco’s collages consistently. The most striking example of this was seen in the introductory collage from session one (figure 1). The image placed in the lower left of the woman with money around her neck was cutoff. Covered faces dominated the collage as evidenced by the illustration of a boy with a turkey over his head, the image of grim reaper with a hood and darkness covering his face, the face with the colored hair was covered up by the face of the child crying, the ballet girl’s face was obscured. Furthermore, the blond woman’s happy face could also be construed as being covered up or wearing a mask as she was being injected with Botox. In fact, a literal mask image popped up in a different collage (figure 9a) in the lower left. This same collage also featured several images with covered up faces, such as the girl with the box for a head, a person being attacked by a black bird and long hair covering the face, man sitting on bench with only legs showing, and the partial eye peeking out (just below the butterfly). Even Marco’s golden folder with the bear face was fragmented due to lack of body and outline for the face. The examples could continue; however, these were the most palpable to bring attention to. Once the researcher sought to track imagery with covered faces, absence of facial features, and fragmented bodies, it was quickly realized that the pattern was conspicuous.
Group 1: Collage Pieces

Throughout the course of treatment, Marco was typically given options for art materials. The researcher noticed that when collage was chosen, Marco was focused on here-and-now experiences, such as his introduction (figure 1), his therapy experiences (figures 2 and 9a), getting a job (figure 16), and what was learned (figure 17). Depictions of trauma were noticeably absent.

A lot of imagery, full use of space, and vibrant color were also noticeable themes within the collage pieces. The utilization of female imagery was a dominant theme never witnessed with the use of other media. Figure 2 was a prime example where, out of the nine human faces, all nine were female. Furthermore, in figure 16, the ratio of females to males was 6 to 1, with the male figure somewhat hidden. While female faces were noticeable and prevalent, many male faces were hidden, obscured, or neutralized in some way. The grim reaper and the body with the turkey on the head (figure 1) could be depictions of males; however, they were obscured. This male obscurity was also evident in figure 9a: The exercise illustrations with the blank faces, a male-like figure sitting on a bench where only the legs are visible, and the long-haired human in which the black bird was attacking could be male or female.

Group 2: Representational Pencil Drawings

Another natural grouping was the multitude of representational drawings (figures 4, 5, 6, 7, 10, 11, 12, 18, 24, 26, 27, 28, and 29). Whereas the collage pieces were devoid of trauma, the past, and family, the representational drawings emphasized them. Depiction of environments, an emphasis on specific elements, lack of color, light line quality, and reinforced lines were explicit
patterns found in Marco’s drawings. Most often, pencil was used, a very controlled medium, to depict emotional volatile material in therapy.

Marco often drew detailed depictions of environments. This was first seen in session four when Marco created art about his bad dreams (figures 4 and 5). Even though the dreams were not direct depictions of trauma, Marco’s feelings related to the dreams were congruent with feelings about past trauma. In fact, Marco’s depictions of environments progressed towards more severe trauma. The dream drawings were followed by the bad memory (figure 6), the lack of connection with siblings (figure 18), physical abuse (figure 24), and finally sexual abuse (figures 26, 27, 28, 29, and 30).

Another noteworthy aspect of Marco’s drawings was the way in which Marco emphasized specific elements on the page. For example, when looking at figure 5, the darkened telephone and the color added to the television screen created a strong emphasis for these objects. In figure 27, not only was the inclusion of a mousetrap by the refrigerator a distinct detail in the artwork, it was also verbalized as “the last straw” and was the last fight Marco had with his father before making the decision to run away. The colored-in soda bottle (figure 10), the size of the mother (figure 6), and the orange window (figure 4) were just a few more examples of the various ways Marco emphasized details in his drawings.

Minimal use of color starkly contrasted with the vivid use of color found in Marco’s collage pieces. The majority of the images possessed no color at all (figures 7, 18, 26, 27, 28, and 29) or a deliberate use of minimal color (figures 4, 5, 6, and 24). Only three drawings possessed full color (figures 10, 11, and 12) but, interestingly, these three drawings were focused on eating, rather than trauma. With the use of full color, these drawings could also be grouped with the collage pieces, which were also full of color and were not focused on trauma.
Marco consistently used a very light line quality when drawing, so much so, that many of the images needed to be enhanced in order to be seen (figures 7, 18, 26, 27, 28, 29, and 30). For many of the drawings, Marco used reinforcement with darker pencil lines, colored pencil, or marker. Figures 6, 12, and 24 were most poignant for this category.

Group 3: Abstract Imagery

The last art grouping was designated to abstract imagery (figures 8, 14, 19, 21, 22, 23, and 25). The researcher spotted sun symbols in all seven abstract art pieces. The aesthetic quality and Marco’s description of the sun icons varied ranging from hope (figures 8 and 19) to a deep-felt anger (figure 14) to a chaotic past (figure 21) to sexual trauma (figures 22, 23, and 25). Once again, lack of color was observed when Marco was focused on trauma-specific events whereas colored imagery was focused on here-and-now experiences, such as living at the TLP (figure 8) and eating (figure 14). The sun icons were most often the sole element, centered, and balanced on the page (figures 19, 21, 22, 23, and 25). When other elements were included the page, the sun icons were not fully integrated and were placed in corners (figures 8 and 14).

Study Questions

1) How did the runaway experience surface in treatment and the art?

The actual act of running away surfaced very little throughout treatment and the art. Although Marco, at times, spoke about the day in which he ran away and how he found the runaway shelter, it was never the focal point of the session or therapy in general. There were only two concrete references to the act of running away in the artwork: 1) the mousetrap (figure 27) that was identified as the catalyst for a verbal fight between Marco and his father. It was after
this fight that Marco ran away and never returned home; and 2) the word “runaway” was written when Marco wrote a list of important topics to explore in therapy. However, Marco crossed it out and stated that he understood the reasons why he ran away and decided that the other topics were a bigger priority.

Despite the minimal direct references to the act of running away, the artwork captured the complexities of Marco’s experience prior to and after running away. For example, the “Unknown Dream” (figure 5) was seeped with anxiety and concern related to Marco’s immediate cutoff from his siblings due to the act of running away. Furthermore, the duality of happiness and sadness observed in the faces in the first two collage pieces Marco created (figures 1 and 2) could be a reflection about how Marco felt about running away, possibly a sense of relief, but also a sense of loss. All the artwork that pertained to Marco’s past revealed what life was like for Marco prior to running away. Overall, the researcher found that the artwork revealed Marco’s runaway experience in subtle and latent ways, rather than in direct and conscious ways.

2) What kind of themes emerged in the imagery and content of the art?

Powerful and obvious themes emerged in the art imagery and content. Controlled chaos was one of the most universal themes identified throughout all of Marco’s art. Emotional flooding, the color yellow, and fragmented bodies were also observed as universal themes. Further groupings (collage, representational drawings, and abstract imagery) helped illuminate additional significant patterns. Female imagery, vivid color, and full use of space dominated the collage pieces. Depictions of trauma, family, and the past arose from the representational drawings. Lack of color and light line quality was highly evident in this grouping. Finally, sun icons and symbols were represented in all artwork that was abstract in nature.
3) Were traumatic experiences visible in the art? If so, what type of trauma and at what point in treatment did trauma emerge in the artwork?

Traumatic experiences were acutely visible in the art. The emergence of the grim reaper in Marco’s collage (figure 1) during session one could be evaluated as being directly connected to trauma as Marco explained how he had had many experiences with death. Furthermore, in the same collage, the crying child and the angry male figure tied up alluded to feelings of distress, sadness, and anger, which may very well be connected to trauma. Much of the artwork from sessions one through four possessed a quality that alluded to exposure to trauma. As treatment progressed, trauma depictions within the art became more specific and concrete. The first concrete depiction of trauma surfaced in session five when Marco drew his bad memory from age five (figure 6) where his father held a belt and his mother was looking passed him. The possibility of neglect surfaced in session eight when Marco drew his typical meal from childhood (figure 10) and Marco reported scarcity of food and lack of food preparation by caregivers. Concrete representations of physical abuse (figure 24) and sexual abuse (figures 22, 23, 26, 27, 28, and 29) were evident in artwork. Overall, neglect, emotional abuse, physical abuse, and sexual abuse were visible in the artwork.

4) Were there observations in the art, the art process, and/or behavior that was indicative of the survival response of “flight?”

A solid recognition of the survival response of “flight” was difficult for the researcher to confirm in Marco’s art, his art process, or behavior. The researcher sensed that a “flight” survival response would be captured in obvious “flight” behavior such as missing therapy sessions,
leaving sessions early, or even leaving the TLP altogether. Marco’s behavior in therapy was quite the opposite of “flight.” Marco displayed high-motivation for therapy and even communicated a desire for more therapy. In fact, Marco never missed a weekly session. Additionally, while living at the TLP, Marco was observed to be at home a lot and even avoided some areas of Los Angeles in fear of seeing his father. When Marco was at the short-term shelter (prior to the TLP), he often wore a wig when he went outside to disguise himself, again, in fear of being recognized by his father. This particular fear response seemed more indicative of a “freeze” response.

Very similarly, there was minimal “flight” characteristics found in the artwork. The strongest indication of “flight” was associated with various bird images found in figures 2, 9a, 16, and 17. However, “freeze” characteristics emerged in the art with more resolution and clarity. The feelings Marco often wrote on the back of artwork coincided with a “freeze” response more so than a “flight” response: “Scared, weak, vulnerable, shocked, motionless, and plain.” The way in which Marco painted and talked about his self-symbol in figure 8, also aligned with a “freeze” reaction. Marco described the self-symbol as being “neutral and flat.” The self-symbol was painted as an organic shape that looked vulnerable, small, and unable to escape the dominance and invasive presence of the blue organic shape. The fact that the two large organic shapes had tentacle-like arms that portrayed movement and the self-symbol lacked these tentacles further accentuated a sense of helplessness and inability to defend itself. The butterfly self-symbol (figure 9b) was another indication of Marco’s relationship with a “freeze” response. Although the butterfly had wings, they were shattered into pieces and the capacity to fly was further hindered by being stuck in cement. Several additional elements that could be associated with the concept of “freeze” were identified in the image of the man tied in rope in
figure 1, the stitching of the folder in figure 3, the drawing of a photo (depiction of a frozen moment) in figure 18, and hyper-awareness of environments.

It was also noticed how Marco’s art process contradicted the temperament of “flight.” A sudden release of uncontained energy could be imagined as a “flight” reaction in the art process. Yet Marco’s art process was highly contained, methodical, and planned. In many respects, quite the opposite of the expectation of “flight.”

Overall, the researcher discovered that it was difficult to uncover clues in the art, the art process, and/or behavior that coincided with the concept of “flight.” However, a divergent concept of “freeze” became an emergent thread.

5) Was there a relationship between the traumatic experiences and running away?

Marco often verbalized that life at home was chaotic and that the physical and verbal abuse he endured by his father was what instigated Marco to run away. Marco never directly stated that sexual abuse was a reason for running away. Nor was neglect or neighborhood violence/gang activity connected to the act of running away. Marco often discussed the physical abuse with others, whereas the sexual trauma was not discussed. In fact, as treatment progressed, Marco informed the researcher that he had never told anyone about the sexual abuse perpetrated by his two half brothers. Therefore, it was possible that the way in which Marco consistently shared his runaway story involved only the physical and emotional abuse.

Findings

In Marco’s case, trauma was an undeniable aspect throughout his young life. At the beginning of treatment, the researcher was aware of the physical and emotional abuse by
Marco’s father and sexual abuse by Marco’s mother’s boyfriend. This information was outlined in Marco’s chart, as was gang affiliation within the family system; however, as treatment progressed, the extent of Marco’s trauma history unraveled further. Revelations of multiple instances of sexual abuse starting at the age of three or four by up to five different perpetrators, including three half brothers, surfaced. The sexual abuse, in conjunction with violent physical abuse, daily emotional abuse, possible neglect, abandonment by mother, neighborhood violence, gang culture, unstable living arrangements (Marco moved nine times since the age of six) coincided with the literature, particularly the concept of pervasive trauma. The research established that trauma was not a secluded, one-time event. Poly-victimization and chronic trauma was ubiquitous as highlighted in Coates and McKenzie-Mohr’s (2010) study that found that RHY had faced 11 to 12 different kinds of highly stressful events on average. Additional studies confirmed that multiple forms of abuse ran rampant in the RHY population (Forde et al., 2011; Gwadz et al., 2007).

The data analysis revealed that “controlled chaos” was a dominant theme throughout Marco’s treatment. It was possible that this theme was connected to Marco’s chronic trauma exposure. The “chaos” may have alluded to the trauma-infested environment in which Marco lived, the traumatic events themselves, the feelings and thoughts related to the trauma, and the internalized schema Marco developed through repetitive abuse within the care-giving system. The “control” may have reflected Marco’s need and desire to dominate and restrict the chaos. Marco’s controlled art process could have created a sense of control over the “chaos.” Sar and Ozturk (2005) explained:

Trauma [was] often characterized by loss of control which may be experienced by the subject as helplessness (Fischer & Riedesser, 1999). As such, the person may be seen as
merely an object of the unpredicted traumatic situation rather than being a subject, because the person cannot save himself/herself. The person can not possess mastery about the experience.” (p. 12)

Perhaps, on some level, the art materials and art processes gave Marco a way to achieve and experience mastery over the chaos. Or perhaps the controlled nature of Marco’s behavior was the only way Marco could protect himself from being consumed by the chaos, whether it be internal chaos, external chaos, perceived chaos, or real chaos.

Another striking correlation between Marco and the literature was in regards sexual orientation. According to the literature, those who identified as gay, lesbian, or bisexual experienced the highest rates of both physical and sexual abuse when compared to their heterosexual counterparts (Tyler & Cauce, 2002). Marco was openly gay. Although, Marco denied his father’s violence toward him had anything to do with Marco’s sexual orientation, it so happened that at age 13, when the physical abuse and emotional abuse became more severe, was also the age in which Marco came out as being gay.

Marco’s explanation about why he ran away aligned perfectly with the literature that focused on the reasons why youth ran away. As Thompson et al. (2012) stated, “family conflict and maltreatment are primary reasons youth give for running away or being forced out of the home by parents encouraging them to leave, abandoning them, or subjecting them to intolerable levels of abuse (Rotheram-Borus, 1993)” (p. 598). Marco reported that he ran away because he could no longer endure life with his father.

Lack of color and the light line quality presented in Marco’s artwork, especially the artwork that related to trauma and family, coincided with Howe and colleagues (1987) research that examined the artwork of RHY and abuse histories. In the study, a faint/sketchy line quality
and avoidance of color were strong indications of abuse, particularly sexual abuse. The way in which Marco’s abuse history and characteristics found in the art aligned with the information gained from this study, suggested that faint/sketchy line quality and lack of color were trauma markers in Marco’s art.

Much of the literature addressed how trauma often continued after a youth ran away from home. However, in Marco’s case, because he was guided to a youth shelter early on, his runaway experience was absent of life on the street. In some ways, Marco’s act of running away could be viewed as a protective force against further trauma or, in the least, a pause from the chronic trauma endured within the care giving system. There was literature that supported the potential of positive outcomes with running away. Washington (2011) cited several authors that considered several positive results associated with running away including resilience, survival, improved quality of life, and personal strength to adapt. Perhaps Marco’s consistent use of the color yellow that so often symbolized hope was an indication of Marco’s optimism for the future, resiliency, and ability to survive. Whether or not these qualities were always there or if they emerged after running away, the fact that Marco identified with “hope” throughout treatment, possibly helped Marco remain in treatment and the TLP, rather than go back home.

Despite the hopefulness found in Marco’s art and verbal language, there was also indication that the act of running away in itself was a form of psychological trauma (McManus & Thompson, 2008), particularly evident in the theme of emotional flooding. The immediate cutoff from his family and friends may have provoked strong feelings of loneliness. Potentially, Marco felt lonely when he lived at home, but the act of running away may have compounded a sense of loss exacerbated by the physical absence of family and friends. The immediate cut-off from familiar people may have prompted Marco to hold everything in and not reveal himself to
unfamiliar people. Therapy possibly provided a space for Marco to let go, which resulted in pressured speech, the use of a lot of imagery, and a desire for longer sessions.

While evidence strongly suggested that there was a direct relationship between the act of running away and trauma, there was little evidence to fully integrate the concept of the “flight” survival response into the equation, at least not in a direct way. Through the process of analysis, aspects of Marco’s art products, art process, and behavior seemed to allude more to the concept of “freeze” than “flight.” This unexpected outcome prompted the researcher to investigate literature about the “freeze” survival response as well as other ideas about human survival responses beyond “fight-or-flight.”

What the literature unearthed was a fascinating parallel between childhood trauma and the “freeze” response (D’Andrea, Pole, Depierro, Freed, & Wallace, 2013; Painter & Scannapieco, 2013). The term “freeze” response was also called dissociation, fear bradychardia, tonic immobility, and shutting down and was characterized by decreased motility, rather than increased motility characterized with “fight-or-flight” (D’Andrea et al., 2013). According to van der Kolk, Brown, and van der Hart (1989), the “freeze” response may be most applicable among trauma survivors when “fight-or-flight” was impossible, most particularly, young children abused by caretakers. Painter and Scannapieco (2013) further elaborated:

With a dissociative response, infants and young children—and later adolescents—may remove themselves mentally and emotionally from the physical or sexual abuse situation. Disassociation allows them to pretend the abuse is not happening and is not real. For some children this might be in a form of self-hypnosis (Stien & Kendall, 2004.) The brain may use dissociation to repress the memories of a caregiver’s abuse in order to preserve the attachment to the caregiver/parent (Stien & Kendall, 2004). (p. 278)
In Marco’s artwork, covered up faces, the absence of facial features, and fragmented bodies were extremely prevalent and could be reflections of disassociation. When Marco drew the back of his own head or his feet sticking out at the bottom of the page (figures 4, 5, 6, 12), it was a literal representation of detachment from his own body. In conjunction with Marco’s verbalized admittance of emotional detachment, it was a strong indication that Marco experienced symptoms of disassociation. Because the analysis unveiled several other indications of a “freeze” response, the relevance of this literature heightened even more so.

The literature also noted that, due to animal and adult studies, there was much more known about the hyper-arousal responses associated with “fight-or-flight” and PTSD than there was about the physiology of disassociation and “freeze” response (Perry, 2001). D’Andrea and colleagues (2013) highlighted two recent studies that brought great attention to the “freeze” response:

While research on cardiovascular threat responses typically reports increases in heart rate following threat, several studies in recent years have found blunted cardiovascular responses among the very individuals who might most be expected to have exaggerated responses: namely, chronically-traumatized people (Cuthbert et al., 2003; McTeague et al., 2010) … McTeague et al. (2010) found that while single-incident PTSD patients had heightened autonomic reactivity to startle probes compared to controls, participants with multiple incident trauma exposure showed blunted reactivity. Cuthbert et al. (2003) found that multiply-traumatized subjects had HR deceleration, not acceleration, suggesting that multiply-traumatized individuals may not show the expected defensive response of sympathetic arousal, but instead display parasympathetic reactivity. (p. 80–81)
Although “freeze” surfaced in the analysis phase, and literature was found that reinforced the potential that “freeze” could very well be a physiological response in sufferers of chronic and complex trauma, the researcher was still struck by the fact that Marco ran away from home, a behavior that seemed so indicative of a “flight” response. Additionally, even though the researcher had difficulty finding “flight” in individual pieces of artwork, there was something about the overarching theme of “controlled chaos” that possessed a sense of both “flight” and “freeze.” Additionally, the themes of emotional flooding and hyper-awareness in environments observed in Marco’s artwork could also allude to “flight.” The notion of a mixed survival state was the premise of an article by Baldwin (2013). In order of increasing threat imminence, Baldwin (2013) outlined five human defensive states that arose from danger: Freeze-alert, flight, fight, freeze-fright, and collapse. According to Baldwin (2013), many documented accounts of survivors of animal attacks, random violence, or other traumatic experiences recalled the successful use of various active and immobility defenses. In other words, multiple defensive states were activated, not just one. Baldwin’s (2013) article went on to discuss a relationship between trauma and the dysregulation of these states. Dysregulation was described as “inefficient or incomplete shifts between states” (p. 1559), as well as a possessing a limited access to more adaptive responses. Baldwin (2013) further explained that:

Lack of resolution following even a single traumatic experience can generate extended wariness or a quick return to vigilance that persists for months or years. A history of unresolved traumatizing experiences could easily sensitize individuals to the common aspects of these incidents, producing a default state of freeze-alert that looks or feels like anxiety. In either case, the wariness of freeze-alert may extend to normal activities of
daily living. Difficulty feeling safe when one is plainly in a safe environment is a common and unsettling indication of this type of dysregulation. (p. 1,559)

The relationship between trauma and dysregulation was also discussed by Sprang, Katz, and Cooke (2009) who used the term allostatic load to describe the physiological dysregulation that occurred in children who were exposed to repeated traumatic events, faced chronic stress related to inconsistent and inadequate caregiving, and experienced disrupted attachments. The development of allostatic load happened when normal regulatory processes became “overwhelmed, strained, and/or threatened, resulting in chronic destabilization of physiologic systems” (Sprang et al., 2009, p. 242).

The ideas presented in this additional literature, along with findings from Marco’s case, unveiled that “flight” alone was possibly too narrow of a picture. A hypothesis that included both “flight” and “freeze” was worthy to consider, whether it was some sort of a dysregulation of “flight” and “freeze” responses, a simultaneous physiological reaction that activated both “flight” and “freeze, or even a pattern of “freeze, freeze, freeze, flight, freeze, freeze.” Perhaps a child’s developmental age was a factor to consider as well. What if a young child’s physiological response to trauma automatically triggered the “freeze” response in order to survive because the child was too young for flight and as the child got older, let us say adolescent-age, the “flight” response was then triggered because the adolescent would be more capable to survive “flight?”

Another poignant bridge between Marco’s case and the literature pertained to diagnosis, particularly PTSD. Throughout treatment, although Marco reported some symptomology, such as difficulty sleeping and lack of appetite, and at times displayed some anxious and depressive behavior, the researcher was unable to concretely diagnose Marco according to the DSM. Symptoms were not severe enough, mixed, or fluctuated with time. A theme from the literature
review highlighted how PTSD diagnoses and symptoms may not be congruous for RHY, especially those with chronic trauma histories. The notion of On-going Traumatic Stress Disorder introduced by Diamond and colleagues (2013) seemed on-point with Marco’s trauma history. Furthermore, D’Andrea and colleagues (2013) research initiated a proposal of two types of PTSD: “1) the hyper-reactive type described in the DSM (i.e., avoidance, hyperarousal, and re-experiencing); and 2) a dissociative type, with blunted emotional and physiological responses (Ebner-Priemer et al., 2005; Koopman et al., 2004; Lanius et al., 2012)” (p. 81).

There were two additional themes that came forth from the analysis phase that were dominantly displayed; however, lacked an obvious connection to trauma, survival response, and/or the act of running away. These were the sun symbols presented throughout the abstract imagery and the female imagery presented throughout the collage pieces. An interesting dichotomous relationship emerged between these two themes when the researcher considered the possibility that the sun symbols represented masculinity and the female imagery represented femininity. The notion that Marco experienced conflict between these two forces, such as identity confusion, sexual confusion, and/or gender role confusion, seemed probable. Marco’s developmental age, sexual orientation while living in a hetero-dominant culture, his lost relationship with his mother, the conflict-filled relationship with his father, and the sexual abuse and betrayal perpetrated by prominent male figures in Marco’s life were all potential factors influencing Marco’s confusion regarding femininity and masculinity. Perhaps Marco’s use of female imagery in the collages represented the connection he has experienced with females throughout his life and the longing for that connection as evidenced by Marco’s desire to reconnect with his mother. Or perhaps the female imagery represented Marco’s rejection and disapproval of his own maleness. Marco’s inability to escape his own maleness came forth with
the sun symbols. In fact, self-identification was evident when Marco used sun symbols to represent himself (figures 14, 19, and 21) and his half-brothers who sexually abused Marco (figures 22 and 23).
VII. CONCLUSIONS

This research focused on runaway behavior, trauma, and the survival response of “flight.” What the case study revealed was a fascinating glimpse into Marco’s experience as a runaway, his devastating trauma history, and how he coped with being catapulted into adulthood. The modality of art therapy allowed for detailed examinations of the art products, the art processes, verbal expressions, and behaviors. Many prominent themes were identified, including controlled chaos, emotional flooding, body fragmentation, female imagery, sun symbols, and the use of the color yellow. Marco’s art also revealed that when Marco was reflecting on a traumatic event, he drew representational drawings with a very light, sketchy line quality and lacked color.

Insights regarding survival responses were gained as well, including an unanticipated and definitive appearance of “freeze.” Consequently, the researcher was prompted to delve back into the pool of literature that expanded on survival responses and trauma. Within this investigation, the complexities regarding the human body’s physiological processes and survival mechanisms in response to chronic trauma illuminated new concepts for future research, such as: 1) An inspection of possible relationships between the “flight” and “freeze” responses, 2) An exploration of human survival responses beyond “fight-or-flight,” and 3) An examination of alternative views of human stress responses that diverged from PTSD.


doi: 10.1080/21650993.2010.9756083


IX. APPENDICES

List of Figures

Figure 1: Introductory Collage (Session 1)
Figure 2: Past Therapy/Hopes for Therapy (Session 2)
Figure 3: Stitched Folder (Session 3)
Figure 4: “Blurth” Dream (Session 4)
Figure 5: “The Unknown” Dream (Session 4)
Figure 6: Bad Memory (Session 5)
Figure 7 (original): Television Character (Session 6)
Figure 7 (enhanced): Television Character (Session 6)
Figure 8: Living at the TLP (Session 6)
Figure 9a: More Time (Session 7)
Figure 9b: Butterfly Close-up (Session 7)
Figure 10: Typical Meal from Childhood (Session 8)
Figure 11: Typical Meal Now (Session 8)
Figure 12: Ideal Meal (Session 9)
Figure 13: Gold Folder (Session 10)
Figure 14: Feelings Related to Not Eating (Session 10)
Figure 15: Bear Folder (Session 11)
Figure 16: Getting a Job (Session 12)
Figure 17: What Was Learned (Session 15)
Figure 18 (original): Sibling Photo (Session 15)
Figure 18 (enhanced): Sibling Photo (Session 15)
Figure 19: Future Symbol (Session 16)
Figure 20: Present Symbol (Session 16)
Figure 21: Past Symbol (Session 16)
Figure 22: Symbol for Half Brother #1 (Session 17)
Figure 23: Symbol for Half Brother #2 (Session 17)
Figure 24: Father’s Physical Abuse (Session 20)
Figure 25: Memory of Light (Session 21)
Figure 26 (enhanced): Room Sexual Abuse Occurred In — Page 1 (Session 22)
Figure 27 (enhanced): Room Expanded — Page 2 (Sessions 23-25)
Figure 28 (enhanced): Room Expanded — Page 3 (Sessions 23-25)
Figure 29 (enhanced): Room Expanded — Page 4 (Sessions 23-25)
Figure 30 (enhanced): Room (Taped Together) — Pages 1, 2, 3, and 4 (Sessions 23-25)
Figure 31: Butterfly Progression
Visualizing the “Flight” Survival Response in Runaways

1) I hereby authorize LeAnn Marschall, MFT Candidate, to include me in this research study.

2) I have been asked to participate on a research project that is designed to investigate the “flight” survival response as it relates to trauma and the act of running away.

3) It has been explained to me that the reason for my inclusion in this project is that I have ran away from home at least one time.

4) I understand that if I am a subject, nothing in my treatment experience will be different as a result. The art therapist will utilize case material and artwork from treatment as part of her data although all identifying information will be carefully removed. This process has been fully explained to me.

5) It has also been explained to me that this information will be used for research purposes only and that my identity will not be disclosed. I understand that I have the right to review the research project before March 1, 2014.

6) I understand that the research project, which may include case material and artwork from my experiences in art therapy group, will be available in a scholarly way on the internet.

7) I understand that LeAnn Marschall who can be reached at (310) 338-4562 will answer any questions I may have at any time concerning details of the procedures performed as part of this study.
8) If the study design or the use of the information is to be changed, I will be so informed and my consent re-obtained.

9) I understand that I have the right to refuse to decline from without prejudice to my future art therapy treatment

10) I understand that I have the right to withdraw from this research before March 1, 2014.

11) I understand that if I have any further questions, comments, or concerns about the study or the informed consent process, I may contact: David Hardy, Ph.D. Chair, Institutional Review Board, 1 LMU Drive, Suite 3000, Loyola Marymount University, Los Angeles CA 90045-2659, (310) 258-5465, david.hardy@lmu.edu, or the research mentor, Dr. Paige Asawa, at (310) 338-4562

12) In signing this consent form, I acknowledge receipt of a copy of the form, and a copy of the "Subject’s Bill of Rights."

Subject’s Signature ________________________________ Date _____________

Witness ________________________________ Date _____________