

## Depression Indices in the Draw-A-Person Test in Adolescence

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**Summary:** Depression indices in the Draw-A-Person Test were examined and compared with the results of the past studies on depressive patients. The subjects were 178 non-patients, university and professional school students, aged 18-25 years old. The Draw-A-Person Test and the Self-rating Depression Scale by Zung, W.W.K. were administered to them. More than 179 indices of the Draw-A-Person Test were compared between the high depression group and the low depression group, using the SDS scores.

The index of detail loss in clothes and the index of small size were significant differences between the two groups and they were admitted as characteristic indices in the human figures of the high depression group. In four indices, eyebrows omission, small nose, slender legs and slender trunk, chi-square tests showed tendencies toward significance between the two groups. The impression of a lack of energy was also recognized as a characteristic index of depression. The findings obtained in this study were in agreement with those obtained in the past studies of the Draw-A-Person Test in depressive patients. Moreover, the relationship between melancholia, which is almost the same as depression, and Japanese classical culture is mentioned.

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**Key Words :** depression, Draw-A-Person Test, Self-rating Depression Scale, depression indices in the Draw-A-Person Test

### 1. Introduction

There are a lot of researches regarding the Draw-A-Person Test in the study of anxiety, but hardly any Draw-A-Person research in the study of depression. And there are few studies of the Draw-A-Person Test on depressed patients. Omori, K., Takaesu, Y.(1981) noted that depressed patients didn't like to draw human figures (on the contrary, the schizophrenic patients often willingly drew them), but they could draw house figures easily. Also Ishikawa, G.(1982) said that depressed patients had difficulty to start drawing spontaneously

because of the inhibition (Hemmung) that was their axial symptom.

Wadson, H.(1980) hypothesized that during higher depression patients' pictures would exhibit the following eight characteristics to a greater degree than when they were less depressed.

1. Less color
2. More empty space
3. More constriction
4. More disorganization
5. Less investment of effort or less completeness

6. Less meaningfulness
7. More depressive affect
8. Less affect

Wright, J. H. et al (1982) noted that less color, less organization, small size of figures, lack of details, more empty space, lack of interest in the environment, hopelessness and lack of energy would be found as the characteristics of the depressed patients' family drawings.

Sandman, C. A. et al (1968) found that 104 psychiatric patients defined as depressed on the MMPI did not draw significantly smaller human figures than non-depressed patients. However, in his research, the depressed group had a slight tendency to draw the smaller human figures.

Koppitz, E. M. (1968) writes in her "Psychological Evaluation of Children's Human Figure Drawing", that very small human figures are related to the depressed condition. And she states, "Depressed and anxious children don't always draw very small human figures. And it can be said reasonably that a child drawing very small human figures will be timid, withdrawn and probably depressed". Moreover she says, "Machover, Jolles, Levy and Lewinson agree with each other that very small human figures always express the feelings of maladjustment, ego-reduction, excessive concern about the treatment of the environment, and especially depression." To speak generally considering the other references, I think that the small size of human figures (more empty space) and the impression of a lack of energy are the most representative indices of the Draw-A-Person Test in the depressive condition. Through the historical survey of references, Ishikawa, G. (1982) describes the characteristics of the psychopathology of expres-

sion in depressed patients.

However, in this study, the problem is not on the depressed patients but on the depressive conditions. This study doesn't pick up the psychopathological matter of the depressed patients, but the depressive tendency or condition as an aspect of the personality. In order to measure that, the SDS (Self-rating Depression Scale) by Zung, W.W.K. is used, and the subjects are adolescent students who have no special psychopathological problem. The purpose of this study is to investigate the depression indices of the Draw-A-Person Test, to ascertain if the indices found in this study will agree with the results of past researches on depressed patients. And, besides, to make a contribution to the normative data.

## 2. Subjects and Methods

Subjects were 178 university and professional school students, aged 18-25, 147 males and 31 females. The Draw-A-Person Test and the SDS Test were administered to them at the intervals of two weeks. Machover's method was used as the instruction of the former test.

Mean score and standard deviation score of all the subjects' SDS's scores were calculated. The subjects were divided into three groups using the obtained scores of mean score  $\pm$  standard deviation score. The High-Depression group (H D) consisted of persons who had higher scores than mean score + standard deviation score in the SDS. Similarly the Low-Depression group (L D), consisted of those who had lower scores than mean score - standard deviation score in the SDS. There were 28 in both groups. Between both groups of subjects, 179 indices and other indices in the Draw-A-Person Test, shown in Table 1 of Tada, K. (1989), were compared with. A part

**Table 1.** Comparison of indices in the Draw-A-Person Test between High-Depressive (HD) group and Low-Depressive (LD) group.

Figures in parentheses show percentages.

	H D	L D	$\chi^2$
total numbers of Ss	28	28	
numbers of male Ss	21(75)	23(82)	0.42
numbers of female Ss	7(25)	5(18)	0.42
small size	11(39)	4(14)	4.46*
light line pressure	7(25)	3(11)	1.10
unequal line pressure	14(50)	9(32)	1.84
sketchily	11(39)	8(29)	0.72
presence of ground line	5(18)	1( 4)	1.68
mild facial expression	2( 7)	6(21)	1.31
vague facial expression	5(18)	2( 7)	0.65
chin emphasized	0( 0)	3(11)	1.41
eyebrows omission	5(18)	0( 0)	3.51†
presence of eyelashes	1( 4)	4(14)	0.88
nose drawn vaguely	5(18)	1( 4)	1.68
small nose	7(25)	1( 4)	3.65†
hair omission	4(14)	1( 4)	0.88
arms gathered to the center of the body	5(18)	2( 7)	0.65
hands or arms in the pockets	1( 4)	3(11)	0.27
hands or arms hidden backward	6(21)	2( 7)	1.31
arms close to the trunk	7(25)	4(14)	1.02
hands without fingers	3(11)	1( 4)	0.27
fingers drawn vaguely	5(18)	3(11)	0.15
slender legs	11(39)	5(18)	3.15†
small feet	14(50)	9(32)	1.84
toes emphasized	1( 4)	4(14)	0.88
slender trunk	11(39)	5(18)	3.15†
presence of buttons, buckle, necktie and so on	8(29)	16(57)	4.67*

\*  $p < .05$  †  $p < .10$ 

of the result is shown in Table 1.

### 3. Results and Discussion

Table 1 shows that in the index of detail

loss in clothes, namely lack of buttons, buckle, pockets, necktie and so on, and in the index of small size, chi-square tests indicate significant differences between both groups,

in each indices,  $x^2=4.67$ ,  $p<.05$  and  $x^2=4.46$ ,  $p<.05$ . Therefore, detail loss in clothes and small size are recognized as the characteristic indices in the Draw-A-Person Test of depression and they agree with the results of former studies. In four indices, eyebrows omission, small nose, slender legs and slender trunk, chi-square tests tend toward significance ( $.05<p<.10$ ) between both groups. Also in the human figures of the higher depressive group, the indices of light line pressure, facial expression or head drawn vaguely, arms close to the trunk and fingers drawn vaguely are more often found than in the human figures of the lower depressive group. Summarizing above indices, the impression of a lack of energy is also recognized as a characteristic index of depression.

With regard to the index of small size, in this study it means that the area of the human figure (height  $\times$  width) is smaller than a quarter of the form. Differing in this study, very small size in the book of Koppitz, E. means that the human figure is shorter than 5 centimeters. Notwithstanding this difference, small size of the figure and large empty space that are characteristics of the Draw-A-Person Test in the depressive condition, are in accord with characteristics of the Draw-A-Person Test in the depressed patients. So continuity of the psychological element expressed in the Draw-A-Person Test can be suggested between the persons (non-patients) with high depressive tendency and the depressed patients. It is the result of this study that depressive persons become easily tired, thus draw constricted small human figures and incomplete vague human figures.

In contrast, from the viewpoint of art, many painters have drawn melancholic human

figures expressing their depressive condition. Some of them are shown in Miyamoto's paper (1986) and these human figures are not necessarily small sized, but are characterized by looks sunk in thought or melancholic looks, by postures with drooped heads (with a slight slouch, or faces turned downward) and by postures with hands on chins or heads. These art products express melancholic human figures which are observed from outside by painters and differ from the human figures drawn by melancholic persons.

Shimoyama, T. (1977), in the chapter of "Melancholia in Dürer, A." of his book, says that melancholia relates to intellectual work and that melancholic person is born under the planet of Saturn and thus he is hopelessly confined to a sorrowful destiny.

Japanese in the past, as described in Miyamoto's paper, was familiar with melancholic feeling (sorrow). In Japanese classical literature or Japanese classical poetry, especially 'tanka' (31-syllable Japanese poems), various sorrows such as sadness, pathos, transiency, loneliness and forlornness are regarded as important and are often expressed. Differing from the Western Christian culture that characterizes the conflicts in the relationship to God, Japanese culture characterizes the changes in time and the uncertainty of the human heart, in other words, "the feeling of nothing everlasting". The key concepts of tea ceremony and ceramic art, which are representative of Japanese culture, are wabi (quiet taste) and sabi (antique looking). And these key words, I think, have some relationship with the words, forlorn or dreary (wabishii) and lonely or deserted (sabishii, sabireta), that express feelings of sorrow.

Especially in Indian ink paintings and some of Japanese paintings, characteristics such as constriction, omission, vagueness, large empty space and so on, agree considerably with the results of this study. Since they are also the characteristics of the Draw-A-Person Test of persons in the depressive condition.

Therefore, I think, these students who are depressive, though not depressed patients, are inclined to maladapt to the present Westernized Japanese environment. Now, many students behave cheerfully, actively, impulsively and worrylessly, and by doing so they seem well adapted. I think that depressive conditions in these students are not necessarily thought of as negative or as psychopathological problems. They need quiet and profound consideration to find their selves which have been lost in the friction with their environment.

### References

- 1) Omori K, Takaesu Y : Depression and its expression in the drawings.....especially, its clinical iconographical approach. Kimura B ed. Psychopathology of depression 4, Kobundo, Tokyo, 1981. (in Japanese)
- 2) Ishikawa G : On the psychopathology of expression in depression, Journal of Clinical Psychiatry 11, 487-498, 1982. (in Japanese)
- 3) Wadeson H : Art psychotherapy. John Wiley & Sons Inc., New York pp61-67, 1980.
- 4) Wright J H, McIntyre M P : The family drawing depression scale, Journal of Clinical Psychology 38, 853-861, 1982.
- 5) Sandman C A, Cauthen N R, Kilpatrick D G, et al : Size of figure drawing in relation to depression, Perceptual and Motor Skills 27, 945-946, 1968.
- 6) Koppitz E M : Psychological evaluation of children's human figure drawing. Grune & Stratton, New York, pp68, 86, 87, 198, 199, 1968, Japanese translation by Koga Y (ed), Kenpakusha, Tokyo.
- 7) Machover K : Personality projection in the drawing of the human figure, C C Thomas, Springfield, Illinois, 1949, Japanese translation by Fukada N, Reimeishobo, Nagoya.
- 8) Tada K : Anxiety indices in the draw-a-person test in adolescence, The Bulletin of Meiji College of Oriental Medicine 5, 67-79, 1989. (in Japanese)
- 9) Miyamoto T : Sorrow feeling and its expression, Japanese Bulletin of Art Therapy 17, 108-116, 1986. (in Japanese)
- 10) Shimoyama T : Glance at human beings. Chuokoronsha, Tokyo, pp96-118, 1977. (in Japanese)

## 青年期の人物描画法テストにおける抑うつ性の指標について

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要旨：青年期に相当する大学生，専門学校生（健常者）178人を被験者として，人物描画法テストとSDSを施行した。28人ずつの抑うつ性の高い群と抑うつ性の低い群を選び出し，両群の人物画を比較して，人物画における抑うつ性の指標を調べた。その結果，服装における詳細描出の欠如の指標と小さいサイズの指標が有意に見出された。又，眉の省略，小さい鼻，細い脚，細い胴体，及び，エネルギーの欠如した印象なども，抑うつ性の指標としてある程度認められた。この結果は又，うつ病の患者の人物画の特徴と一致するものだった。さらに，抑うつ性とほぼ同じ概念であるメランコリーと日本の伝統的文化との関連にも言及した。

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キーワード：抑うつ性，人物描画法テスト，SDS（自己評価式抑うつ性尺度），人物描画法テストの抑うつ性の指標