

AN ABSTRACT OF THE THESIS OF

LYSA K. JUDSON for the MASTER OF SCIENCE
(name of student) (degree)

in PSYCHOLOGY presented on JULY 18, 1991
(major) (date)

Title: The Validity of the Draw-A-Person Test as a

Sexual Abuse Indicator

Abstract approved by: Cooper B. Holmes

The Draw-A-Person Test (DAP) is frequently administered and utilized as a psychological assessment technique. It is believed that people can project feelings, needs and conflicts into their drawings. Often it is these factors that they are unable to verbally state. This can be a problem for many people who live with conflicts. Sexually abused women frequently do not open up to reveal inner problems. Therefore, this current study sought to investigate if women who reportedly were sexually abused give any indication of such in their DAP.

The DAP results of 60 women, 30 of whom reported being sexually abused and 30 of whom reported no sexually abuse were examined. The first

two drawings of the DAP were scored by raters for ill-defined hands, transparency and shading of the genital region and/or inner thighs.

Six chi square tests indicated that there was no significant difference between groups for any of the factors. There were ill defined hands, transparency, and shading of the genital area and/or inner thighs for both sexually abused and non-abused women.

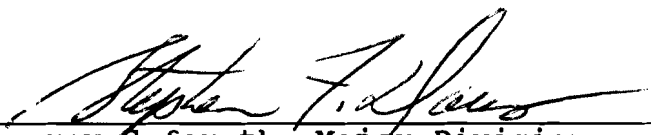
THE VALIDITY OF THE DRAW-A-PERSON TEST
AS A SEXUAL ABUSE INDICATOR

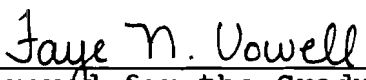
A Thesis
Presented to
the Division of Psychology
and Special Education
EMPORIA STATE UNIVERSITY

In Partial Fulfillment
of the Requirements for the Degree
Master of Science

by
Lysa Karen Judson
August 1991

7-10
1991
J


Approved for the Major Division


Approved for the Graduate Council

ACKNOWLEDGEMENTS

I would like to thank the members of my committee. Dr. Holmes for serving as the chairman of my committee and giving special guidance, Dr. Joseph for giving me much need support and Dean Blanchard for having taught me tremendous amounts of knowledge about research over the past two years. Their direction, comments, and advise are greatly appreciated and respected.

I would also like to thank Dr. Davis for having helped me get started on the right foot in graduate school. In addition, I owe a special thank-you to Dr. Balleweg at Lycoming College for having encouraged me to go to graduate school and who continues to serve as a mentor for me.

Finally, I would like to thank my parents, Robert and Barbara Judson who have been absolutely fantastic in supporting my efforts throughout my academic career, even when I might have doubted them. Also, the rest of my family and friends who were always there to support and help me through rough times but, there to enjoy the good with me too.

TABLE OF CONTENTS

| CHAPTER | PAGE |
|------------------------------|------|
| 1. INTRODUCTION..... | 1 |
| 2. METHOD AND PROCEDURE..... | 15 |
| 3. RESULTS..... | 20 |
| 4. DISCUSSION..... | 25 |
| REFERENCES..... | 27 |
| APPENDICES..... | 32 |

LIST OF TABLES

| TABLE | PAGE |
|--|------|
| 1 PRESENCE AND ABSENCE OF CHARACTERISTICS FOR THE MALE DRAWING OF SEXUALLY ABUSED AND NON-SEXUALLY ABUSED WOMEN..... | 22 |
| 2 PRESENCE AND ABSENCE OF CHARACTERISTICS FOR THE FEMALE DRAWING OF SEXUALLY ABUSED AND NON-SEXUALLY ABUSED WOMEN..... | 23 |

CHAPTER 1

Introduction

Many clinicians as well as everyday citizens are becoming aware of the different types of abuse that occur in our society. Physically, emotionally, psychologically, and sexually abused people are seeking help at mental health centers, hospitals, clinics, churches, and private offices around the country (Miller, Veltkamp & Janson, 1987; Sundberg, 1961). At these treatment facilities, various psychological projective techniques are used to help these clients.

Review of the Literature

In 1965 Zubin, Eron, and Schumer concluded, "...projective techniques rebelled against the entrenched approaches to the evaluation of personality which psychometricians had developed" (p. 605). This is not to say projective techniques are superior to tools that psychometricians developed, but it exemplifies constant changes within a single profession.

The idea of assessing an aspect of a person through the implementation of a projective technique

can be traced back to the late 19th and early 20th centuries. This technique, often referred to as projective testing or projective measurements, is best defined by English and English (1958) as, "A procedure for discovering a person's characteristic mode of behavior in response to a situation that does not elicit or compel a particular response" (p.413). Although there are several different definitions which have been stated throughout the years (Semenoff, 1976; Zubin, Eron, & Schumer, 1965), Phares (1988) found English and English's to be a pragmatic definition.

The data or information that is evoked by projective tests is believed to be imagery and fantasy. The emotional information which surfaces is usually significant in connecting past events with present behavior (Galton, 1879; Murray, 1938). This enables the therapist or examiner to formulate meanings about otherwise unknown factors regarding a person. Projective tests have the ability to usually reveal the inner feelings, emotions, and thoughts of a person. Most psychologists would support the ability of projective tests to detect an individual's conflicts, fears, values, strengths, styles of coping

and functioning (Cressen, 1975; Walrond-Skinner, 1986). Five characteristics are involved in the construction of projective tests (Phares, 1988):

1. The subject must formulate a structure to an ambiguous stimulus.
2. The stimulus must be unstructured.
3. The method employed needs to be indirect.
4. There must be freedom enough for the subject to respond as he or she desires.
5. The interpretation of the response should encompass several variables.

Projective tests were first used as a way of assessing the different developmental stages of childhood. Between 1885 and 1920, there were numerous psychological studies of childrens' drawings. The peak interest was between 1900 and 1915 (Goodenough, 1926). During this time there were few attempts to establish a theory behind a person's drawing behavior. The behavior or unconscious process of the person's drawings were not evaluated in a psychological fashion (Harris, 1963).

One of the main contributors to the utilization of projective techniques was Florence Goodenough (Machover, 1949). Goodenough (1926) centered much of her investigation around the implementation of a projective measure as opposed to any theoretical hypothesis. In developing a projective test, she devised the Draw-A-Man (DAM) assessment technique (Goodenough, 1926). This test had specific directions for administration. Also developed was a precise scoring method.

Originally, Goodenough investigated the relationship between a child's conceptualization development, intelligence, and his or her personality (Oakland & Dowling, 1983). Goodenough (1926) saw the medium of drawing as a primary language for most children. Goodenough also reported that there is a close relationship between intelligence and concept development as shown in drawings. Further she believed that "...children would exaggerate the size of items which seem interesting or important; other parts are minimized or omitted" (p. 12).

The developmental processes in childrens' drawings are remarkably persistent from child to child.

Goodenough suggested that this is particularly true in the drawing of human figures since they are universally familiar. These drawings usually have relatively proportioned parts and the number of parts are usually the same (e.g. two arms of approximately the same size). Serving as a positive aspect is that for most people when drawing a human figure, a model is not needed. This is because a person is capable of maintaining in his/her memory how a human being looks. Naturally, this enhances the reliability of the test since a person has the same recollection of what people look like each time he or she takes the test.

Goodenough also believed that subnormal children would draw at an impeded level, resembling a younger, normal child's drawing. The difference between a normal and subnormal child's drawing would most likely be easily identified by skilled clinicians. Throughout the years, this has led other psychologists to believe that a projective technique such as the DAM would help indicate clinical diagnoses or judgments that need to be made. This is in conjunction with Goodenough's original assumption that childrens' drawings would indicate their level of intelligence.

In 1949 Karen Machover modified the DAM to be the Draw-A-Person Test (DAP). During the past 40 years this has become one of the most frequently used techniques for psychological assessment (Holmes & Wiederholt, 1982; Maloney & Glasser, 1982; Pihl & Nimrod, 1976; Sundberg, 1961). Having changed the administration of the test to Draw-A-Person, allows a person more freedom to project into his or her drawings more needs and conflicts. Machover believed that this was a better vehicle to assist a person in exploring his or her individual personality.

Characteristics of the DAP

Strommen and Smith (1987) discussed numerous and distinct advantages of using the DAP as a means of assessment. They addressed such factors as the easy administration, the short time needed to collect the data and score the protocols, minimal verbalization required from the client, and most of all as a way to establish rapport in a testing situation. Along with these, the human figure is known to all children.

The DAP has been studied by numerous researchers to determine its accuracy. Of importance to all researchers or clinicians who use a test is the

reliability and validity of the instrument.

Reliability, which is the ability of an instrument to produce the same results at different times and settings has been found to be quite good. With various time periods having been studied, the reliability of the DAP has a high degree of agreement (Evans, Ferguson, Davies, & Williams, 1975; Strommen & Smith, 1987).

Urban (1968) claimed diminutive or small drawings of figures indicate depressed individuals. However, this is not consistent with a study by Holmes and Wiederholt (1982). They found no difference between drawing sizes of figures for depressed and non-depressed subjects. Also incorporated in the study by Holmes and Wiederholt was a test to indicate if the gender of the subject yielded a significant difference. It was found that gender did not generate a significant difference.

Wanderer (1969) found people who were reportedly experts in the use and interpretations of the DAP were not able to correctly evaluate it when used with a group of clinically diagnosed patients. The patient groups contained schizophrenics, neurotics, and

homosexuals. In a follow up report done by Hammer (1969) it was suggested that Machover had never intended the test to be used as a instrument for important diagnostic conclusions.

The majority of the research that has been done on the DAP has been limited (e.g., drawing conclusions from small samples of college students) (Farylo & Paludi, 1985). This gives many researchers a way to question the test as a valid measure that can be applied to all age groups and personalities. Pihl and Nimrod (1976) found that as a personality assessment tool, the DAP was not consistent with the Children's Personality Questionnaire when viewing emotional factors.

The validity studies that have been done reported difficulties due to the absence of a good scoring method (Briere & Runtz, 1988). Methodology systems for assessing the protocols appear to be of concern since they do not report any established validity (Sims, Dana, & Bolton, 1983).

Sexual Abuse

The majority of sexual abuse victims are females, but males are also abused (Courtois, 1988; Smith &

Kunjukrishnan, 1985). Courtois (1984) noted as many as 20 percent of all women have been sexually abused in some manner. Today most people are accepting of the idea sexual abuse is not limited to having intercourse. Sexual abuse can be defined as any sexual act that all participants are not in full agreement with and/or have not given consent while in a stable, clear frame of mind. This sexual act can leave scars of some manner, either physical, cognitive, or psychological. Many sexually abused women often are left with visual scars, such as bruises, burns or skin lesions, as well as feelings of exploitation, betrayal and guilt (Urbancic, 1987).

Sexual abuse research has primarily focused upon the psychological problems that are believed to be identified with victims of childhood sexual abuse (Gorcey, Santiago, & McCall-Perez, 1986). For example, denial of the incident is often an effect of incestual abuse (Taubman, 1984). Closely associated with childhood sexual abuse are sexual attitudes as an adult. Difficulty relating to men is often an adverse effect for women who have been abused earlier in life (Bass and Davis, 1988; Courtois, 1988). The victim

frequently will believe that she once trusted a male who took advantage of her and scarred her for life; therefore, she is hesitant to trust another male again.

Clinically, feelings of depression, fear and anxiety are consequences of this type of abuse (Bass et al., 1988; Gelinas, 1983; Gorcey et al., 1986; Herman, 1981). These negative feelings can sometimes be experienced long into adulthood if not dealt with at a young age. Courtois (1988) reported that as many as 40 percent of sexually abused women seek treatment as adults.

Significant symptoms can be found in women who have been sexually abused. Briere and Runtz (1988) found that women from a university who reportedly were sexually abused, had higher acute and chronic levels of disassociation and somatization. Along with these, the students also had greater depression and anxiety than a group of college women who had not been abused. Another conclusion this study was able to draw was that since none of these women had received treatment for the abuse, there are many women who remain silent victims. It should be questioned how many women who are in therapy for depression, anxiety, a personality

disorder or some other problem might actually be a silent victim of sexual abuse.

The evaluation of sexually abused clients for a clinician is a hypersensitive process that must be completed. Some clinicians believe it is especially difficult to do when assessing children (Miller, Veltkamp & Janson, 1987). Due to obvious limitations of childhood, such as vocabulary and knowledge of what is right or wrong, projective measures are frequently employed. Projective measures like the DAP enable the child to make up a story or picture which they might not truly view as their real life experience. The DAP and other projective techniques have been instrumental in assessing sexually abused children.

Drawing of Sexual Abuse Victims

Most of the past research on the DAP has focused upon its usefulness with child victims of sexual abuse. Wohl and Kaufman (1985) described the drawings completed by child victims of sexual and other types of abuse. The drawings suggested the absence of well-defined hands indicates the child's feelings of helplessness. In addition, the lack of distinct hands indicate the inability to control or manipulate the

environment. Wohl and Kaufman further noted that hands with undefined fingers are indicative of being unable to take care of oneself.

Several variations of hand drawings were noted by Urban (1987). He reported that neglect of hands relates to guilt feelings possibly associated with sexual feelings. Machover (1949) reported that it is difficult for many subjects to draw hands since they are often symbolic of love, caressing, hurting, killing, disruption, and adaptation. It is troublesome for subjects to project these feelings into their drawing because of the far-reaching implications surrounding hands. Furthermore, it was suggested by Machover that when hands are omitted from the drawing or placed behind the back it should be viewed as an expression of the subject's evasiveness.

Another characteristic of children who were sexually abused is transparency in the drawing (Wohl and Kaufman, 1985). Transparency is seen as being an indicator of primitive sexual behavior. For the child, the behavior may stem from the sexual abuse inflicted earlier in life. Machover (1949) concluded that transparency through clothing was drawn by subjects who

were preoccupied with sexual impulses. This could be related to the finding that adult females who have experienced sexual trauma have similar drawings to abused children.

Another distinction for children who have been sexually abused is the use of shading in their drawings. Children who have had undergone severe abuse tend to shade their drawings. This is done in an attempt to cover up and conceal hidden feelings and events. Shading in the legs and genital areas has been revealed by some children who have been sexually abused (Wohl & Kaufman, 1985). Urban (1968) reported that sexual conflict might be present when legs are heavily shaded. It has been suggested by Machover (1949), that when shading in the sexual area of the female figure is done with considerable force "...it suggests furtive and inhibited sexual concerns" (p. 99).

Purpose of the Study

The purpose of this study was to determine the validity of the DAP as a tool which would be useful for identifying sexually abused women. To date, the DAP has not been studied as an indicator to determine if an adult female has been sexually abused. It is critical

to have testing instruments that accurately assess sexual abuse. By studying the DAP it is hoped that correct and accurate assessments can be conducted.

Significance of the Study

For therapists who suspect a woman might have been sexually abused, although the client continues to deny the abuse ever occurred, such a projective technique would be useful. If the DAP were to be a significant indicator of sexual abuse, the healing process for sexually abused victims might come about sooner. In addition, it would be a significant contribution to broadening the knowledge of how information surrounding incidences of sexual abuse for children can be related to adult females.

CHAPTER 2

Method

Subjects

Two groups were selected, with each group consisting of 30 women. Group A was comprised of women reporting having been sexually abused. Group B was comprised of 30 women who reported no sexual abuse. The files of previous clients who met the criteria and completed the DAP were used. All subjects were: (a) female, (b) between the ages of 21 and 50, (c) clients at a mental health clinic, and (d) residents of a community no larger than 25,000 people (at the time treatment was sought).

Procedure

Upon receiving consent of the clinic, the files of clients to whom the DAP was administered and who fit the criteria were selected as part of the study. The search began at the most recent date and proceed back in time. The first 30 files of women who reported sexual abuse and the first 30 files of women who did not report sexual abuse were utilized if they fit the criteria for this study.

The first two drawings done by the client were photocopied. The names and any other information were removed. Upon elimination of the personal or identifying data on each drawing, a number was assigned. After this each of the drawings was placed into a folder along with a scoring sheet for each of the drawings, instructions for the raters.

Raters

Raters of the DAP for this study were two registered masters level psychologists. Both had taken a course in the administration and interpretation of DAP drawings, and both had three years experience interpreting the test. When discrepancies occurred between the two raters, a Ph.D. psychologist who had been using the DAP for 20 years resolved the discrepancies. The third rater's judgement was final.

Each of the raters was asked to evaluate the drawings and return the packet of folders to the researcher. The raters were given no more than 30 folders at a time to decrease the expenses of having to copy all 60 drawings twice. For each of the drawings the raters were asked to score them according to a list of defined terms, which was provided as an aid for

scoring. After the rater completed the first packet which consisted of 30 folders, he or she was given a second packet of folders. Each of the packets consisted of approximately half sexually abused and half not sexually abused subjects' drawings. After the two raters completed the scoring process of the drawings, discrepancies were resolved by the third rater.

Scoring

Scoring was done categorically, due to the nature of the data. The characteristics appeared down the left hand side of the page and had two lines to the right where the raters checked whether the characteristic was present or absent for each drawing (see Appendixes A and B). The following characteristics were rated:

1. Hands. Hands are not drawn or visible in the drawing or they are ill-defined if present. For example, a mitt-like hand with all fingers together would be considered ill-defined.
2. Transparency. Transparency is when any or all body parts are shown through the

clothing. For example, legs being seen through pants or breasts shown through blouses.

3. Shading of genital region and/or inner thighs. Numerous lines over the genital region and/or inner thigh area of the figure's leg(s). They can be light or dark as long as they are more than a single line from the pencil.

The dependent variable was the judgement of the raters as to the presence or absence of each characteristic of the drawing. The independent variable was whether or not the woman had been sexually abused.

Statistical Design

Chi-square (χ^2) of independence analysis was conducted to determine if a significant difference was found between the sexually abused and non-sexually abused women's drawings. Statistical tests were carried out for each of the three separate characteristics, (a) hands, (b) transparency, and (c) shading of genital region and/or inner thighs. This was done for each drawing: male and female.

Therefore, a total of six separate statistical tests were run encompassing all 60 subjects. Since each characteristic was used only once when completing the analysis of the results the chi square test were appropriate. The chi square test was computed at the .05 alpha level and a degree of freedom equalling one.

The results of each of the items that the raters scored was assigned a number. If the characteristic was present then a one was assigned and if it was absent, a two was assigned. The scores were then divided into group A (abused) and group B (non-abused) subgroups.

CHAPTER 3

Results

The present study was designed to assess the utility of the Draw-A-Person Test (DAP) as an indicator of sexual abuse. Three separate characteristics were evaluated for 30 reportedly sexually abused women and 30 women who reportedly had not been sexually abused. Each characteristic was separately analyzed using a chi square of independence test.

The chi square tests revealed no statistically significant relationship for any characteristic in all six comparisons. Upon analyzing the male drawing, there was no significant difference for ill defined hands in either Group A (reportedly sexually abused) or Group B (reportedly not sexually abused)

$$\chi^2(1, N = 30) = .36, p > .05.$$

The second chi square test for the male drawing, this time analyzing transparency, also yielded no significant relationship $\chi^2(1, N = 30) = .24, p > .05$.

The last chi square test for the male drawing was comparing shading of the genital or inner thigh area. Again, no significant difference was generated

$$\chi^2(1, N = 30) = .43, p > .05.$$

Chi-square analysis of the female drawings for each characteristic produced no significant differences. Upon comparing Group A and Group B for ill defined hands, no significant difference was found $\chi^2(1, N = 30) = .10, p > .05$. The second analysis for the female drawing, examining the transparency characteristic, reported no significant difference $\chi^2(1, N = 30) = .67, p > .05$. The last chi square test for the female drawing also indicated no significant relationship was present $\chi^2(1, N = 30) = .02, p > .05$. Each of the characteristics are summarized in Tables 1 and 2, for the male and female drawings respectively.

Table 1

Presence and Absence of Characteristics for the Male
Drawing of Sexually Abused and Non-Sexually Abused
Women

Drawing of Male

| | <u>Hands</u> | <u>Transparency</u> | <u>Shading</u> |
|-----------------|--------------|---------------------|----------------|
| Presence | | | |
| Abused | 17 | 2 | 12 |
| Non-abused | 12 | 3 | 2 |
| Absence | | | |
| Abused | 13 | 28 | 18 |
| Non-abused | 18 | 27 | 28 |

Table 2

Presence and Absence of Characteristic for the Female
Drawing of Sexually Abused and Non-Sexually Abused
Women

Drawing of Female

Hands Transparency Shading

Presence

Abused 19 5 11

Non-abused 12 3 3

Absence

Abused 11 25 19

Non-abused 18 27 27

The similarities between the male and female drawings should be noted. Each of the three characteristics appeared to be present or absent approximately the same number of times for each of the two gender drawings.

CHAPTER 4

Discussion

The results of the current study indicate the Draw-A-Person Test (DAP) is not a good indicator of women who have been sexually abused. Thus, its validity for this purpose is low. This is contrary to results stated in a report by Wohl and Kaufman (1985) of drawings completed by children of sexual and other types of abuse. In that report, they described their subjects as having drawn ill-defined hands.

Transparency within a drawing also yielded no significance. This is a counter to the view of Machover (1949) who concluded that transparency through clothing was drawn by those who were preoccupied with sexual impulses or thoughts. Again, Wohl and Kaufman (1982) reported that transparency in drawings was a characteristic of children who were sexually abused.

The final characteristic studied was shading, which produced no significant difference for those who were reportedly sexually abused. This is contrary to previous research by Urban (1968) who reported that sexual conflict might be present when legs are shaded. The shading of the genital region and/or inner thigh

area as suggested by Wohl and Kaufman (1982) is contrary to the results of this study.

These results suggest caution when using the DAP in clinical settings, especially to determine if any sexual abuse has occurred in a woman's life. One limitation of this study was the size of each sample group (30). This was restricted by the number of drawings available. In addition, the samples were drawn from the limited population of a small midwestern mental health center. Hence, generalization would be limited.

Possible future research for the DAP might focus upon other aspects in which the DAP would be considered a valid or non-valid instrument. It is vital to clinical psychology as a profession to have assessment instruments that are valid and useful in therapy. The therapeutic process is a difficult one to begin with; however, by having useful assessment techniques to employ the process might proceed along faster and smoother for the client.

References

- Bass, E., & Davis, L. (1988). The courage to heal. New York: Harper & Row, Publishers.
- Briere, J., & Runtz, M. (1988). Symptomatology associated with childhood sexual victimization in a nonclinical adult sample. Child Abuse & Neglect, 12, 51-59.
- Courtois, C. (1984). The incest experience and its aftermath. Victim: An International Journal, 4, 337-347.
- Courtois, C. (1988). Healing the incest wound: Adult survivors in therapy. New York: Norton.
- Cressen, R. (1975). Artistic quality of drawings and judges' evaluations of the DAP. Journal of Personality Assessment, 39(2), 132-137.
- English, H.B., & English, A.C. (1958). A comprehensive dictionary of psychological and psychoanalytic terms. New York: Longmans, Green.
- Evans, R., Ferguson, N., Davies, P., & Williams, P. (1975). Reliability of the Draw-A-Person Test. Educational Research, 18, 32-36.

- Farylo, B., & Paludi, M.A. (1985). Research with the Draw-A-Person Test: Conceptual and methodological issues. The Journal of Psychology, 119(6), 575-580.
- Galton, F. (1879). Psychometric experiments. Brain, 2, 149-162.
- Gelinas, D.J. (1983). The persisting effects of incest. Psychiatry, 46, 312-332.
- Goodenough, F.L. (1926). Measurement of intelligence by drawings. New York: Harcourt, Brace, & World, Inc.
- Gorcey M., Santiago, J.M., & McCall-Perez, F. (1986). Psychological consequences for women sexually abused in childhood. Social Psychology, 21, 129-133.
- Hammer, E.F. (1969). DAP: back against the wall? Journal of Consulting and Clinical Psychology, 33, 151-156.
- Harris, Dale B. (1963). Children's drawings as measures of intellectual maturity. Harcourt, Brace, & World, Inc.
- Herman, J. (1981). Father-daughter incest. Professional Psychology, 12(1), 76-80.

- Holmes, C.B., & Wiederholt, J. (1982). Depression and figure size on the DAP test. Perceptual and Motor Skills, 55, 825-826.
- Machover, K. (1949). Personality projection in the drawing of the human figure. Springfield, IL: C.C. Thomas.
- Maloney, M.P., & Glasser, A. (1982). An evaluation of the clinical utility of the DAP test. Journal of Clinical Psychology, 38(1), 183-190.
- Miller, T.W., Veltkamp, L.J., & Janson, D. (1987). Projective measures in the clinical evaluation of sexually abused children. Child Psychiatry and Human Development, 18(1), 47-56.
- Murray, H.A. (1938). Explorations in personality. New York: Oxford University Press.
- Oakland, T., & Dowling, L. (1983). The Draw-A-Person Test: Validity properties for nonbiased assessment. Learning Disability Quarterly, 6, 526-534.
- Phares, E.J. (1988). Clinical Psychology: Concepts, Methods, & Profession. Chicago, IL: The Dorsey Press.

- Pihl, R.O., & Nimrod, G. (1976). The reliability and validity of the D-A-P Test in IQ and personality assessment. Journal of Clinical Psychology, 32(2), 470-472.
- Semenoff, B. (1976). Projective techniques. New York: Wiley.
- Sims, J., Dana, R.H., & Bolton, B. (1983). The validity of the DAP test as an anxiety measure. Journal of Personality Assessment, 47(3), 250-257.
- Smith, S., & Kunjukrishnan, R.. (1985). Child abuse: perspectives on treatment and research. Psychiatric Clinics of North America, 8(4), 665-683.
- Strommen, E.F., & Smith, J.K. (1987). Internal consistency and bias considerations of the Goodenough-Harris Draw-A-Person Test. Educational and Psychological Measurement, 47, 731-736.
- Sundberg, N. (1961). The practice of psychological testing in clinical services in the U.S.. American Psychologist, 16, 79-83.
- Taubman, S.. (1984). Incest in context. Social Work, 29(1), 35-40.

- Urban, W. (1968). The Draw-A-Person catalogue for interpretive analysis. Los Angeles: Western Psychological Services.
- Urbancic, J.C. (1987). Incest Trauma. Journal of Psychosocial Nursing, 25(7), 33-35.
- Walrond-Skinner, S. (1986). A dictionary of psychotherapy. New York: Routledge & Kegan Paul.
- Wanderer, Z.W. (1969). Validity of clinical judgments based on human figures drawings. Journal of Consulting and Clinical Psychology, 33, 143-150.
- Wohl, A., & Kaufman, B. (1985). Silent screams and hidden cries. New York: Brunner/Mazel Publishers.
- Zubin, J., Eron, L.D., & Schumer, F. (1965). An experimental approach to projective techniques. New York: John Wiley & Sons, Inc.

APPENDIX A

The scoring sheet used by raters when scoring the Male Drawing.

ID. # _____

Scoring for Male Drawing

PresentAbsent

Hands

Transparency

Shading of genital
region and/or
inner thighs

APPENDIX B

The scoring sheet used by raters when scoring the
Female Drawing

ID. # _____

Scoring for Female Drawing

PresentAbsent

Hands

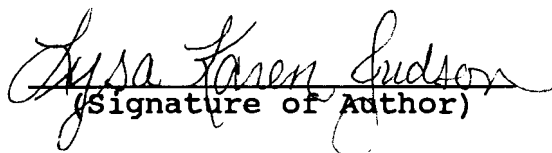
Transparency

Shading of genital
region and/or
inner thighs

To: All Graduate Students Who Submit a Thesis or Research Problem/Project as Partial Fulfillment of the Requirements for an Advanced Degree

From: Emporia State University Graduate School

I Lysa Judson, hereby submit this thesis to Emporia State University as partial fulfillment of the requirements for an advanced degree. I agree that the Library of the University may make it available for use in accordance with its regulations governing materials of this type. I further agree that quoting, photocopying, or other reproduction of this document is allowed for private study, scholarship (including teaching) and research purposes of a nonprofit nature. No copying which involves potential financial gain will be allowed without written permission of the author.


(Signature of Author)

(Date)

The Validity of the Draw-A-Person Test as a Sexual Abuse Indicator.

Title of Thesis

Signature of the Graduate Office Staff

Date Received