



Psychotherapy Guidebook

SELF-PUZZLE:

**A DIAGNOSTIC AND
THERAPEUTIC TOOL**

Chalsa Loo

Self-Puzzle:

A Diagnostic and Therapeutic Tool

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Self-Puzzle: A Diagnostic and Therapeutic Tool

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DEFINITION AND HISTORY

To the patient, diagnostic testing is frequently a mysterious anxiety-provoking experience. The patient often is unaware of either the purposes of the tests or the meaning of his responses. Moreover, since diagnosis is often a separate process from therapy, the patient usually never sees the tester again once the evaluation is completed.

The autocratic role of the examiner is another source of anxiety during diagnostic testing (Schafer, 1954). The dominating aspects of the tester's role allows for little sharing of control with the patient. Relinquishing control can be very threatening to the patient, particularly when there is no ongoing relationship between him and the examiner.

It seems especially regrettable that the patient often receives no direct gain from his participation nor feels any real involvement in the process. In developing diagnostic tools that can be integrated into the therapeutic process, continuity of person through the processes of assessment and therapy can be achieved. This notion is evidenced elsewhere, as in Art

Therapy. Rubin (1973) reports agreement that “there is much to be said for an activity which is a pleasant kind of cathartic or expressive projective technique, serving both therapeutic as well as diagnostic purposes.” The Self-Puzzle is a tool that has potential diagnostic usefulness for the therapist and therapeutic usefulness for the patient.

TECHNIQUE

The patient is provided with color crayons containing a large variety of colors and a large plain white piece of paper. The instructions to the patient are:

In some ways everyone is a puzzle, consisting of many different parts. You are a puzzle with parts that are special just to you. In many ways therapy is a process of understanding ourselves, the parts of ourselves, and how the parts fit together. I would like you to think about yourself and then draw a puzzle with parts that are labeled that best describe you, as you see yourself now. The number of parts, the shape of the parts, the colors of the parts, and the positioning of the parts are all up to you. They should, however, be used to represent yourself as descriptively as possible. The purpose of this puzzle is to help you understand yourself better, to help me understand you better, and to help us in working out problems in our therapy sessions together. There are no right or wrong answers. This Self-Puzzle is your own creation,

and you are to use as much self-understanding as you can. I would like you to create this on your own time, with no one else's help, and you may take as long as you wish.

Each Self-Puzzle must be extensively followed up with as much material that can be of therapeutic value to the patient and diagnostic value for the therapist. The patient should be encouraged to talk about his Self-Puzzle, what it means to him and what associations arose when he created it. The therapist should treat it with the same interest and respect that he accords the patient.

The most prominent benefit of the tool for the patient is that it encourages introspection, which leads to greater self-definition.

The Self-Puzzle helps patients make their feelings concrete by labeling and drawing them, leading to greater control and ownership over such feelings and thoughts. The patient achieves a sense of distance when he draws his feelings and thoughts out on paper. When parts of their puzzle are relevant to therapy, the therapist can comment on what is happening and how he sees the patient functioning. In the case of one fourteen-year-old client, it served to objectify the client's emotions. The therapist did not need to impose a purely verbal interpretation, but instead was able to refer the client to the Self-Puzzle. Seeing his emotions in the context of his own self-

made puzzle aided in greater control and ownership of his feelings and thoughts (see illustration, p. 592).

APPLICATIONS

The Self-Puzzle is especially useful with patients who have difficulty verbalizing the feelings they are experiencing. Where a patient is disturbed or inhibited by interpersonal contact, the Self-Puzzle, which can be created when the patient is alone, encourages the patient to share more of himself without necessarily having to verbalize it first. Thus, it is a tool that encourages closer contact between patient and therapist. As with art therapy, when “patients picture such inner experiences they frequently become more verbally articulate.” (Naumburg, 1966) This was the case with a twelve-year-old selective mute, where verbal therapy seemed impossible. The Self-Puzzle allowed her to pictorially express and then talk about her anger.

The Self-Puzzle provides a method for charting changes that occur within the patient or throughout the therapeutic process by using repeated administrations of a Self-Puzzle, modifications of an original one, or the inclusion of aspects of therapy in the Puzzle.

The Self-Puzzle can also be used as a vehicle for sharing perceptions between people. The therapist and patient can create and then share both a puzzle of themselves and a puzzle of the other. The Self-Puzzle can be utilized

in group therapy as an exercise to encourage feedback between members.

Several factors must be taken into account in analyzing the Self-Puzzle: the number of parts of the puzzle (indicative of complexity of self-perception, degree of defensiveness or openness), the central dimensions of the puzzle and their respective weights (indicative of self-perception, range and description of affect (moods and emotions), motivating factors, critical issues or events, interpersonal relationships and values), and the qualities of the drawing in terms of boundaries between parts, their positioning and size, and in terms of color.

(Further description of the Self-Puzzle with illustrative examples are contained in Loo, 1974.)