



## Symbolic echoes of conflict: Archetypal patterns in projective drawing of traumatized children in civil war-torn Myanmar

Kok Hwee Chia<sup>1</sup>, Madeline Foong Yee Wong<sup>2</sup>, Gideon Kap Cin Thang<sup>3</sup>

<sup>1</sup> Missioner, Open Ministry, USA

<sup>2</sup> Singapore Bible College, Singapore

<sup>3</sup> Presiding Pastor, Brave Ministry, Myanmar

### Abstract

Projective drawings are widely used in trauma-informed child assessment as non-verbal pathways into internal emotional states, particularly in contexts where verbal expression is limited. This paper synthesizes archetypal patterns observed in drawings by three children exposed to civil unrest in Myanmar, including the Fragmented Self, Hypervigilant Watcher, Absent Figure, Fortress, Aggressor, Displaced Journey, Silent Landscape, Protector Figure, Chaotic Scene, and Frozen Moment. Drawing on principles from Dialogic-Diagnostic Arts Therapies and Traumatized Behavioral Therapy (incorporating Trauma Psychology), the paper situates ten key archetypes within trauma responses, such as dissociation, hyperarousal, grief, and resilience. Emphasis is placed on culturally responsive and ethically grounded interpretation, cautioning against over-pathologizing imagery that may reflect lived realities of conflict, particularly within the context of the Myanmar civil war. The paper advocates for integrative assessment approaches combining visual analysis with narrative elicitation and developmental understanding.

**Keywords:** Projective drawings, childhood trauma, myanmar, art therapy, symbolic analysis

### Introduction

Children exposed to armed conflict and civil unrest often experience disruptions in emotional regulation, identity formation, and cognitive processing [1]. In contexts such as the Myanmar civil war, where instability, displacement, and exposure to violence are prevalent, conventional verbal assessment methods may be insufficient due to developmental limitations, linguistic barriers, or trauma-related inhibition. Projective drawing techniques have thus emerged as valuable tools within the domain of varied arts therapies (not merely art therapy per se) for screening or accessing children's internal worlds in a non-threatening and expressive manner [2].

Projective drawings enable clinicians and researchers to explore symbolic representations of fear, loss, and resilience [3]. However, interpretation requires careful contextualization within frameworks of trauma psychology [4] to avoid reductive or deterministic conclusions. Rather than functioning as diagnostic instruments, these drawings serve as communicative artifacts that reflect children's lived experiences and coping mechanisms. This paper outlines key archetypal patterns observable in such drawings and situates them within trauma-informed interpretive frameworks, emphasizing ethical, cultural, and developmental considerations.

### Literature Review

The use of drawing in psychological assessment has a long history, evolving from projective techniques, such as the Draw-A-Person test, House-Tree-Person Drawing test and Draw-A-Family test, to contemporary trauma-informed art therapy practices. Early projective approaches were grounded in psychoanalytic theory, positing that drawings reveal unconscious conflicts and personality structures [5].

However, modern perspectives emphasize a more nuanced understanding that integrates developmental, cultural, and contextual factors [6].

Within trauma research, visual expression has been recognized as a critical modality for children who struggle to articulate distress verbally. According to Judith Herman, trauma disrupts narrative continuity, leading to fragmented memory and difficulties in verbal integration [7]. This disruption often manifests visually through disorganized or symbolic imagery, such as fragmented bodies or chaotic scenes. Similarly, Cathy Malchiodi highlights that art-Aggressor, Displaced Journey, and Silent Landscape described in this paper. Hypervigilance, a core feature of post-traumatic stress, is often reflected in exaggerated sensory elements, particularly eyes or surveillance motifs [11]. Dissociative responses, including depersonalization and identity fragmentation, may appear as incomplete or distorted human figures [12].

Importantly, cultural context plays a significant role in shaping symbolic expression. In Southeast Asian contexts, including Myanmar, visual motifs may incorporate religious symbolism, community structures, and environmental elements that reflect local lived realities rather than purely internal pathology [13]. Researchers caution against over-pathologizing such imagery, noting that drawings of soldiers or weapons may represent normalized environmental exposure rather than maladaptive cognition [14].

Recent trauma-informed frameworks advocate for integrative interpretation strategies that combine visual analysis with narrative inquiry, behavioral observation, and developmental assessment [8,15]. This aligns with a shift away from purely interpretive models toward collaborative meaning-making processes that prioritize the child's voice and agency.

## 1. Recurring Archetype Patterns in Traumatized Children's Projective Drawings

Interpreting projective drawings, especially from children exposed to trauma like civil unrest in Myanmar, requires caution. These are not diagnostic tools, but they can offer symbolic windows into emotional states, coping patterns, and internal conflicts when triangulated with observation, interviews, and developmental context [5,6].

In trauma-informed practice, e.g., drawing from specialized fields like multidisciplinary Dialogic-Diagnostic Arts Therapies (DDAT) and Traumatized Behavioral Therapy (TBT), which also incorporated Trauma Psychology [17], certain recurring archetypal patterns tend to emerge. These are not universal, but they are commonly observed in children exposed to war, displacement, or political violence [9,10,15].

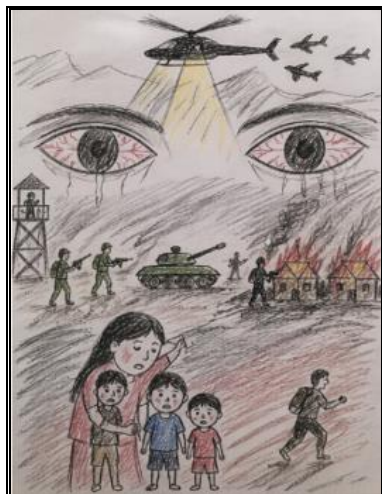
**Table 1:** Key Archetypes observed in Projective Drawings of Traumatized Children

| Key Archetypes                       | Visual Cues                                                                                                                           | Interpretation                                                                                                                                                                                                    |
|--------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 1. The Fragmented Self               | Disconnected body parts<br>Floating heads, missing limbs, or distorted proportions<br>Split figures or mirror images                  | Reflects dissociation, identity fragmentation, or difficulty integrating traumatic experiences into a coherent self. Often seen when children feel psychologically “broken” or unsafe in their own bodies [7,12]. |
| 2. The Watcher / Hypervigilant Eye   | Oversized eyes<br>Figures looking sideways or over shoulders<br>Presence of surveillance-like elements (watchtowers, eyes in the sky) | Represents hypervigilance, a hallmark of trauma exposure. Children in conflict zones (e.g., those affected by the Myanmar civil war) often internalize constant threat monitoring [9,11].                         |
| 3. The Absent or Vanishing Figure    | Faint outlines, erasures, incomplete figures<br>Missing family members<br>Transparent or ghost-like bodies                            | May signal loss, grief, or ambiguous disappearance (e.g., detained or missing relatives). Also linked to emotional withdrawal or numbing [8,13].                                                                  |
| 4. The Fortress / Enclosed World     | Houses with no doors or windows<br>Heavy boundaries, walls, cages<br>Small figures inside large enclosures                            | Symbolizes need for safety and containment, but also isolation. The world is perceived as dangerous; safety is rigid and closed off [6,10].                                                                       |
| 5. The Aggressor / Weaponized Figure | Guns, soldiers, tanks<br>Dominant large figures overpowering smaller ones<br>Scenes of violence or pursuit                            | Represents internalized fear, powerlessness, or identification with aggressor (a defense mechanism). Children may reenact what they have witnessed [7,15].                                                        |
| 6. The Displaced Journey             | Roads, rivers, boats, migration paths<br>Figures moving from one place to another<br>Camps, tents, or temporary shelters              | Reflects displacement, fleeing, and instability, common among children affected by forced migration or internal displacement [9,14].                                                                              |
| 7. The Silent Landscape              | Empty environments with minimal or no people<br>Burnt trees, barren land, dark skies<br>Monochromatic or muted colors                 | Indicates emotional numbing, desolation, or loss of vitality. The environment mirrors internal emptiness [12,13].                                                                                                 |
| 8. The Protector Figure              | Large adult/animal shielding smaller figures<br>Religious or symbolic guardians<br>Superheroes or mythical beings                     | Represents coping and resilience, an internal or wished-for source of safety. Important to identify as a strength marker [6,8].                                                                                   |
| 9. The Chaotic Scene                 | Disorganized layout<br>Overlapping elements, lack of spatial coherence<br>Intense, erratic strokes                                    | May reflect cognitive overload, anxiety, or traumatic re-experiencing, i.e., difficulty organizing thoughts and emotions [11,15].                                                                                 |
| 10. The Frozen Moment                | Static scenes (e.g., people standing still, no action)<br>Repeated depiction of a single event<br>Lack of narrative progression       | Linked to trauma fixation—the child is “stuck” in a particular moment of fear or loss [7,12].                                                                                                                     |

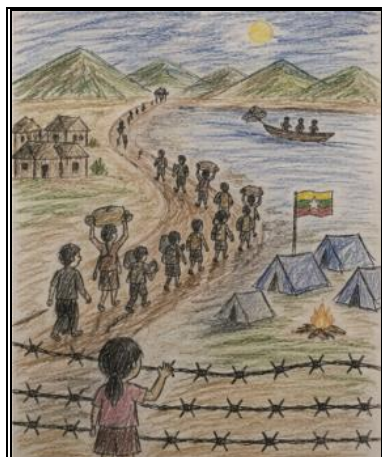
### Cultural and Contextual Considerations

Symbol meanings [18] are shaped by Myanmar's cultural, religious, and social context, such as the presence of the military (see Drawing 1), village life (see Drawing 2), Buddhist imagery (see Drawing 3), and, so interpretation must remain grounded in lived experience; DDAT and/or TBT practitioners should avoid over-pathologizing, as a

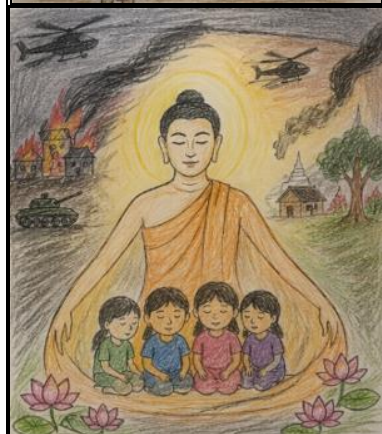
drawing of soldiers may simply reflect everyday reality rather than distress or disorder, and they should also recognize that language barriers and disruptions in literacy may make drawing a primary and more accessible mode of communication. The names of all the three drawers, aged 11 (male), 12 (female) and 15 (female), are kept anonymous to protect their identities.



- Drawing 1:
- Key Archetypes: Watcher / Hypervigilant Eye, Aggressor / Weaponized Figure, Chaotic Scene, and Frozen Moment.
- Description: Large eyes dominate the sky, watching over a chaotic scene of soldiers, tanks, and burning houses. A family cowers in fear while a helicopter shines a light down. The scene is filled with movement yet everything feels frozen in terror.
- DDAT Interpretation: Reflects hypervigilance, threat monitoring, and trauma fixation. The child may feel constantly watched and unsafe, with memories stuck in a moment of fear and chaos.



- Drawing 2:
- Key Archetypes: Displaced Journey, Silent Landscape, Absent or Vanishing Figure, Fortress / Enclosed World.
- Description: A line of people walking away from their village, carrying belongings. Mountains, a river, and tents suggest a refugee camp. In the foreground, a child stands behind barbed wire, separated from others.
- DDAT Interpretation: Represents displacement, loss of home, and separation. The barbed wire and distant figures reflect feelings of isolation and the child's pain of being left behind.



- Drawing 3:
- Key Archetypes: Protector Figure, Fortress / Enclosed World, Silent Landscape, Resilience.
- Description: A large monk / Buddha figure shelters four children within his robe. Outside, there are signs of war (e.g., helicopters, smoke, and destruction), but inside the robe is peace, light, and lotus flowers.
- DDAT Interpretation: Shows a strong need for protection and safety. The child expresses hope, spiritual coping, and the desire for refuge from violence. Highlights resilience and inner sources of strength.

### Ethical and Clinical Use

Drawings should always be interpreted in context, alongside verbal narratives (for example, asking “Tell me about your drawing”), behavioral observations, and the individual’s developmental level, rather than in isolation <sup>[18]</sup>. Clinical frameworks developed by people like Cathy Malchiodi <sup>[8,15]</sup> and Judith Herman <sup>[7]</sup> further emphasize prioritizing safety, empowerment, and meaning-making, rather than relying on rigid symbolic decoding.

### 3.3 Practical Tip

Instead of asking “What does this mean?”, it is often more helpful to invite exploration through questions such as “Who is safe here?”, “What is happening before or after this moment?”, and “If you could change something in the picture, what would it be?”, as these prompts gently guide the child from re-experiencing toward a sense of agency and, ultimately, toward re-authoring their experience <sup>[18]</sup>.

### Conclusion

Projective drawings offer a valuable, though complex, window into the psychological experiences of children exposed to civil unrest. The archetypal patterns identified, ranging from fragmentation and hypervigilance to resilience and protection, reflect both the impact of trauma and the adaptive strategies children employ to cope with adversity. Grounded in principles from Dialogic-Diagnostic Arts Therapies (DDAT) and Traumatized Behavioral Therapy (TBT), these interpretations must be approached with caution, cultural sensitivity, and ethical responsibility. Rather than serving as diagnostic endpoints, projective drawings are best understood as entry points into dialogue, enabling children to express their unique experiences that may otherwise remain inaccessible. Future research studies

should focus on developing culturally validated interpretive frameworks and integrating visual methods into broader assessment and intervention models. In contexts such as the Myanmar civil war, the Ukraine-Russia war, and the Israel-Gaza conflict, such projective approaches (e.g., drawings, stories, or abstract images) are essential for supporting the psychological recovery and resilience of affected children.

### References

1. Hazer L, Gredebäck G. The effects of war, displacement, and trauma on child development. *Humanities and social sciences communications*, 2023;10(1):1-9. doi:10.1057/s41599-023-02438-8.
2. Brennan M. Examining correlations between graphic indicators in projective tests and clinical criteria of PTSD in children and adolescents [dissertation]. Philadelphia College of Osteopathic Medicine, 2024. Available from: [https://digitalcommons.pcom.edu/psychology\\_dissertations/634](https://digitalcommons.pcom.edu/psychology_dissertations/634).
3. Sheridan R, Van Lith T. Exploring the impact of metaphors on resilience in art therapy using mixed methods. *Journal of Creativity in Mental Health*, 2025;20(3):424-38. doi:10.1080/15401383.2024.2388198.
4. Kira IA. Taxonomy of stressors and traumas: An update of the development-based trauma framework (DBTF): A life-course perspective on stress and trauma. *Traumatology*, 2022;28(1):84. doi:10.1037/trm0000305
5. Machover K. Personality projection in the drawing of the human figure. Charles C Thomas, 1949.
6. Hammer EF. Advances in projective drawing interpretation. Charles C Thomas, 1969.

7. Herman JL. Trauma and recovery. Basic Books, 1992.
8. Malchiodi CA. The art therapy sourcebook. 2nd ed. McGraw-Hill, 2007.
9. Betancourt TS, Khan KT. The mental health of children affected by armed conflict. *Int Rev Psychiatry*,2009;20(3):317-328. doi:10.1080/09540260802090363
10. Klorer PG. Expressive therapy with severely maltreated children. Rowman & Littlefield, 2005. doi:10.1080/07421656.2005.10129523
11. Pynoos RS, Steinberg AM, Piacentini JC. A developmental psychopathology model of childhood traumatic stress and intersection with anxiety disorders. *Biological Psychiatry*,1999;46(11):1542–1554. doi:10.1016/S0006-3223(99)00262-0.
12. van der Kolk BA. The body keeps the score. Viking, 2014.
13. Miller KE, Rasmussen A. War exposure and daily stressors in post-conflict settings. *Soc Sci Med*,2010;70(1):7-16. doi:10.1016/j.socscimed.2009.09.029
14. Jordans MJD, Piggot H, Tol WH. Resilience in children affected by armed conflict. *J Child Psychol Psychiatry*,2016;48(3-4):232-240. Doi:10.1007/s11920-015-0648-z
15. Malchiodi CA. Creative interventions with traumatized children. Guilford Press, 2008.
16. Freud AA. The ego and the mechanisms of defence. Hogarth Press, 1936.
17. Ruglass L, Kendall-Tackett K. Psychology of trauma 101. Springer Publishing Company, 2014.
18. Wang TQ, Xie GH. Archetypal and symbolic meanings in children's projective drawings. Lambert Academic Publishing, 2023