

FROM THE ABYSS TO THE CONNECTION: THE DESIGN OF THE BRIDGE BETWEEN DRUG ADDICTS AND PEOPLE WITH SEVERE MENTAL DISORDERS



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ABSTRACT

Objective: to understand the symbolism and verbalization of graphic production in Art Therapy in a comparative way between people who use CAPS-ad and CAPS for Severe Mental Disorders. Method: Qualitative and comparative research, with a descriptive and exploratory design. The participants were 30 adults with drug problems and 30 with severe mental disorders, users of two CAPS in the Federal District. In the data analysis, a questionnaire was applied about the profile of the participants, a thematic drawing in Art Therapy and an interrogation about the drawing, in addition to the evaluation script on the graphic representation in Art Therapy. Results: Throughout the analysis of the recurrent symbols in the drawings in a comparative way between the groups and which were supported by the verbalization on the graphic representation, four main thematic categories emerged, namely: "Connection of the bridge with the environment", "Incorporation of the human figure", "Richness and color of the scene" and "Presence of water". Final considerations: It is believed that the proposal facilitated the participants of both groups to find self-understanding, through the search for the meaning and perception of their life trajectory, activating their memory, organizing narratives and encouraging the expression of more detailed and in-depth information about themselves.

Keywords: Art therapy, Mental disorders, Mental health, Integrative and Complementary Practices, Health care.

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INTRODUCTION

The American Psychiatric Association (APA, 2023) defines mental disorders as a set of signs and symptoms, characterized by a clinically significant disorder that leads the person to have a consistent impairment in cognitive issues — of thoughts, emotional regulation, and behavior that is reflected in a psychological, biological, and developmental dysfunction underlying the subject's mental functioning. Mental disorders are often associated with significant suffering or disability that affects the person in all its areas, such as socio-affective, professional, relationship and activities of daily living of the person. Among the severe mental disorders, drug addiction, mood disorders, anxiety disorders, and schizophrenia stand out.

Currently, it is known that drug addiction represents one of the main social and public health challenges, which causes difficulties not only for addicts, but also for society and their families. The consumption of psychoactive substances is associated with individual pleasure; therefore, this practice has been in our world since the beginning and is also perceived to be present in all the various socioeconomic classes (Pratta; Santos, 2009). It should be noted that illicit drugs are those prohibited by law, such as marijuana in Brazil, while licit drugs are legally allowed as alcoholic beverages (Rocha, 2005).

According to the World Health Organization (WHO, 2008), drug addiction, whether licit or illicit, is treated as a disease. The user becomes tolerant to intoxication and, over the time of consumption, presents health problems. When the substance is withdrawn, signs and symptoms of withdrawal appear, which can be associated with other factors, such as physical and mental problems. However, mental disorders are directly linked to substance use, as they modify the cells of the central nervous system, which can result in psychotic disorder and dependence syndrome. Therefore, early diagnosis and adherence to treatment are of great importance (Fernandes et al., 2017).

It is observed that in the past, people with severe mental disorders were stigmatized as "crazy" and, unfortunately, even today, we witness this nomenclature being attributed, which generates prejudice in the area of mental health. This fact contributed to the numerous tragedies in asylums in Brazil. However, due to the struggle of mental health professionals in various regions of the country, the Mental Health Workers Movement (MTSM) was born, which gave rise to the Psychiatric Reform. It is known that, today, mental disorders have multifactorial causes, requiring specialized care and family and social

support (Candido et al., 2012) Thus, it is of paramount importance to offer follow-up and health care to these users, to allow their integration into society.

The suffering and vulnerability of people with severe mental disorders demands specialized treatment, and one of the Brazilian public health services that offer strategic mental health care is the Psychosocial Care Centers (CAPS). They work with health knowledge and practices and produce new ways of providing mental health care that is more convergent with the psychosocial model, recommended by the national mental health policy guidelines (Lima; Gussi; Furregato, 2017).

The CAPS that arose from the need to provide treatment for the user not only with medications, but also in the search for other methods. The CAPS are part of public health, it replaces the treatments prior to the Psychiatric Reform, focusing on the user and their families, it promotes their family, social and community reintegration. In these units, activities are carried out in groups that seek the development of creativity, dialogue and promotion of physical health (Lima; Gussi; Furregato, 2017).

In Brazil, the CAPS aimed at the adult public are the CAPS – alcohol and other drugs (CAPS-ad), which offer care to the public with substance-related disorders and addictive disorders, and the CAPS that mostly attend to other severe psychiatric disorders, which can be listed, in particular, the public with Schizophrenia Spectrum, other Psychotic Disorders, Bipolar Disorder, Depressive Disorders and Anxiety Disorders.

From 2017 onwards, there was the implementation and expansion of Integrative and Complementary Practices (PICS) regulated through the National Policy of Integrative and Complementary Practices (PNPIC) in mental health and among these PICS in mental health, Art Therapy can be pointed out (Brasil, 2017). It is known that Art Therapy is a tool that expresses art through techniques such as drawings, paintings, music, poetry and dance, frequently used in the health area, contributing to evaluation, prevention and treatment (Coqueiro, Vieira; Freitas, 2010).

According to Valladares-Torres (2021a), Art Therapy meets the objectives of current mental health practice, which consist of offering creative activities that can enhance quality of life and facilitate the autonomy of users. Art Therapy allows it to be a therapy aimed at people with mental disorders, aiming to facilitate the creation of bonds, allowing that subject to become more active and participative in their treatment (Soares; Valladares-Torres, 2020).

Art Therapy is a creative therapeutic activity that stimulates the projection and catharsis of feelings, thoughts and emotions; it also fosters reflection, the organization of internal conflicts, and self-knowledge (Valladares-Torres, 2021b; Valladares-Torres; Rodrigues, 2025). One of the resources used in the context of Art Therapy is projective drawing, which has been shown to be effective in communicating the subjectivity of the participants, as it helps the person to expose their projected images and dialogue with them, as well as the professional, to make a comprehensive analysis of the symbols presented (Valladares-Torres et al., 2023).

There is a lack of research that addresses Art Therapy as a therapeutic process with drug-dependent users compared to people with severe mental disorders. From this finding, the need arose to research and foster new discussions about the benefits of Art Therapy in the treatment of different types of mental disorders. Thus, the following question was asked: What are the symbols and dynamics of drawing in Art Therapy of people who use CAPS-ad and CAPS for Severe Mental Disorders? Do the drawings produce subjective responses about the emotional state among these groups?

This study aims to understand the symbolism and verbalization of graphic production in Art Therapy in a comparative way between people who use CAPS-ad and CAPS for Severe Mental Disorder, in the same way to know the profile of these participants.

METHOD

TYPE OF STUDY

This is a qualitative and comparative study, with a descriptive and exploratory design. Qualitative research exposes subjective aspects of the human being, explores meanings, motives, aspirations, beliefs, values and attitudes (Minayo, 2016).

TARGET POPULATION

A sample of 60 users was obtained, 30 adults with drug problems and 30 people with severe mental disorders. The inclusion criteria were: several genders, age over eighteen years, who agreed to participate in the research and without time frame or treatment phase. Users who had physical and/or mental difficulties in understanding the projective drawing and/or answering the research instruments were excluded. The participants were separated into two groups, one of drug addicts (GDD) and the other of severe mental disorders (GTM).

PLACE OF STUDY

The study was carried out in two Psychosocial Care Centers in the Federal District, the CAPS that served people with severe mental disorders (GTM) and CAPS – ad aimed at the public with alcohol and other drug problems (GDD).

DATA COLLECTION

The collection took place from March to May 2024, lasting two hours each intervention, through an individual/collective Art Therapy session.

Initially, interviews were conducted with the participants and an active search in the medical records in order to obtain data on the patients. The questionnaire for this purpose aimed to collect data on the profile of the participants, with the following variables: age, gender, marital status, education, number of children, person with whom they live, support network, type of mental disorder and time of treatment at the CAPS.

Then, the thematic drawing of the "bridge" in Art Therapy was requested. The bridge symbolizes a passage or connection between two worlds, or even the transition between two dimensions (past-future) and the present moment and represents a difficult crossing, similar to every initiatory journey of the individual (Chevalier; Gheerbrant, 2017). The drawing aimed to evaluate the personal meaning of the users of his drawing and how he faced his crossing. To carry out this activity, the participants were offered: black and colored pencil 2B, eraser, marker marker, crayons and a sheet of white A4 size sulfite paper.

Subsequently, a short interview was developed about the drawing elaborated with the following items: title; age and characteristics of the drawing or the bridge and a story or what the drawing reminded or thinking; what does the bridge have to do with you?; Where did the bridge come from (past) and where will it take you (dreams, objectives and goals)?; And what are you doing on the bridge (present)?

DATA ANALYSIS PROCEDURES

The Evaluation Guide of the aspects of qualitative analysis of the plastic representation in Art Therapy defined by Valladares-Torres (2015) was used and the items were incorporated, namely: general description of the work and the bridge, creativity, omissions or inclusions of elements; other characteristics, such as colors, level of development and, at the end, subjective comments of the evaluators were articulated.

The analysis of the drawings was anchored by authors of C. G. Jung's Analytical Psychology framework (Furth, 2013) and the dictionary of symbols (Chevalier; Gheerbrant, 2017).

In the results, the thematic comprehensive categories of the drawings were exposed. The thematic categories were based on Bardin (2011) and the following phases were included: understanding the symbolism of the recurrent drawings and reading the questionnaires about the drawings and, subsequently, the categorizations, descriptions and interpretations of the information acquired in the thematic units will be presented in a comparative way between the two groups researched (GDD and GTM).

ETHICAL ASPECTS

The present study is a subproject of the umbrella project called "Art Therapy as a therapeutic device in drug addiction", which was approved by the Research Ethics Committee of the Foundation for Teaching and Research in Health Sciences (CEP/FEPECS), according to CAAE No. 44625915400005553. All participants were informed about the functioning and objectives of the research and all signed the Informed Consent Form (ICF). The identity of the participants who had their names omitted and were designated by the letter "P" followed by the type of group (GDD or GTM) and differentiated by the number after the letter, in a sequential manner, namely: PGDD1-30 and PGTM1-30, was safeguarded.

RESULTS AND DISCUSSIONS

PROFILE OF THE PARTICIPANTS

The study included 30 people with GDD (drug addicts) and 30 GTM (severe mental disorders), aged between 18 and 64 years; the mean age for the GTM (34.5 years) was slightly lower than the GDD (42.8 years). It was identified that most of the participants were separated or single, had children, lived with their families, and had a low level of education — Complete Elementary School. Among the two groups, people without a fixed income and who had less than one year of follow-up in the service and had a support network prevailed, with the family being the one that stood out the most. Regarding gender and diagnosis, most of the GDD were male and alcoholic, and the GTM was female and with depressive and anxiety disorder.

The sociodemographic profile of the participants in this study is similar to those found in the CAPS for mental disorders or alcohol and other drugs (AD) in Brazil, such as: predominance of adults without affective company, with children, low education, no occupation and no fixed income, who lived with the family (Govoni et al., 2017; Cetolin et al., 2022) and the family was the support network (Govoni et al., 2017).

At CAPS-ad, the prevalence is of males, with a high average age and with prevalent alcohol use (Govoni et al., 2017; Cetolin et al., 2022). In relation to the CAPS for mental disorders, there was similarity in relation to the female gender, but there was a difference between some surveys published in Brazil. In the review study by Trevisan and Castro (2017), psychotic disorders stood out and in the study by Govoni et al. (2017), schizophrenia prevailed, followed by Recurrent Depressive Disorder.

COMPREHENSIVE AND COMPARATIVE CATEGORIES ABOUT DRAWINGS IN ART THERAPY

Through the Art Therapy intervention with the projection of the drawing of the bridge and the questionnaire about the drawing, it was possible to evaluate the psychic trajectory of the participants. It also facilitated the subjective expression of their life journey, in the different groups, verbally and non-verbally. Although the images were poor in detail, they all managed to represent the bridge and talk about it symbolically and the process helped to promote self-awareness.

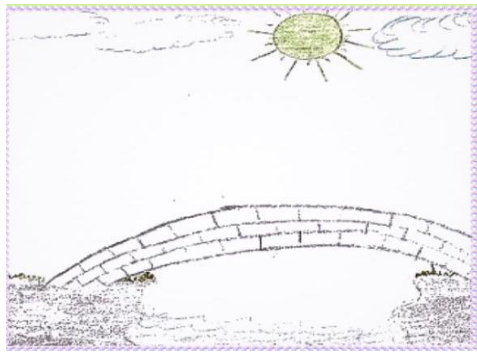

This includes saying that all participants in both groups (GTM and GDD) expressed and visually recorded their experiences, perceptions, feelings, and imagination in front of the bridge design. Data similar to the results found in the research by Valladares-Torres et al., 2019; Valladares-Torres, 2021a; Valladares-Torres; Moura, 2022; Valladares-Torres; Silva, 2022; Valladares-Torres; Angels, 2023; Valladares-Torres; Martins, 2023; Valladares-Torres et al., 2023.

Throughout the analyses of the recurrent symbols in the drawings in a comparative way between the groups and which were supported by the verbalization on the graphic representation and four main thematic categories emerged, the following stand out: "Connection of the bridge with the environment", "Incorporation of the human figure", "Richness and color of the scene" and "Presence of water".

Category I "Connection of the bridge with the environment"

In many of the GDD drawings, there was the presence of a connection between the bridge and the environment (n=18), and the bridge was based on entry and exit paths. In the GTM, only the design of the bridge (n=26) prevailed, and in some of them, with a bridge floating in the leaf space (n=15). Chart 1 shows some drawings that illustrate category I: "Connection of the bridge with the environment" of the two groups analyzed.

Table 1. Summarized general description of the predominant findings on the drawings of the two groups evaluated regarding category I: "Connection of the bridge with the environment". Brasília, Distrito Federal, Brazil. (n=2)

Drug Dependent Group (GDD)	Severe Mental Disorder (GTM) Group
	
<p>Figure 1. Authorship of the drawing: PGDD26, a 57-year-old man, dependent on multiple drugs, in a therapeutic proposal at CAPS-ad for three years. Without affective company, he had two children, lived alone, incomplete elementary school and was unemployed.</p> <p>Drawing title: <i>A link to a colon</i></p> <p>About the design: <i>my bridge was made of concrete and brick, safe, happy, rich and hard, but which generates fear and anxiety. The bridge is 27 years old, and I'm trying to cross to the other side. The bridge symbolizes my treatment. Right now I'm trying to maintain balance, moving away from the world of drugs (past) and towards physical and mental stability (future).</i></p>	<p>Figure 2. Authorship of the drawing: PGTM2, a 63-year-old woman with depression and anxiety disorders, in a therapeutic proposal at the CAPS for two years. Without affective company, he had three children, with whom he lived, attended incomplete high school and without a fixed income.</p> <p>Title of the drawing: <i>A definitive passage through happiness.</i></p> <p>About the design: <i>my bridge is a walkway made of concrete to resist everything. She is cheerful, secure, strong, big, beautiful and tough. The bridge is five years old, the time when treatment for depression began. It represents the joy of the present moment, a period in which I want to remain. I don't want to represent the past or the future, just the here-and-now in this state of happiness and be able to stand up.</i></p>

Source: Survey data, 2025.

The male participant PGDD26 brings in graphic representation and verbalization the connection of the past with the present and future. In his drawing, the participant represents a bridge over a river and its firm connection between the earth and nature (clouds, sun and

grass), which translates, in a summarized way, the drawing of the GDD participants, who were represented, for the most part, by the connection of the bridge with other elements.

It was noticed that, in totality, the participants of the GTM evidenced, in their work, a certain difficulty in connecting the bridge with other contexts, and the bridge almost always represented the present and the here-and-now, while what comes before the bridge – the past and what comes after the bridge – the future. Thus, in the images of the GTM participants and symbolically in life, it was observed that it was very difficult for the participants to make a past-future connection with the present. And many also verbalized the denial of their past, an aspect that translates the meaning of abyss and a certain difficulty in connecting with the real world.

The bridges, for Chevalier and Gheerbrant (2017), refer to a passage to be crossed and overcome. For the members of the GDD, this passage referred to treatment, rehabilitation and steps towards drug control and a promising future with dreams and goals. While in the GTM, the bridge also symbolized the treatment, but the emphasis on the present moment and the future, as little rescue of the past.

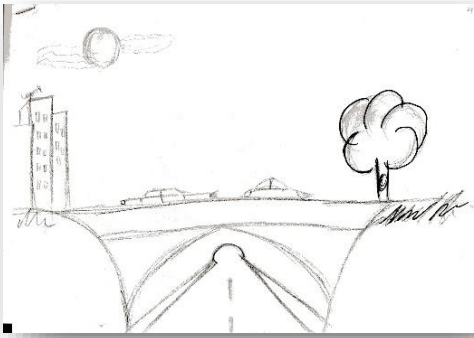
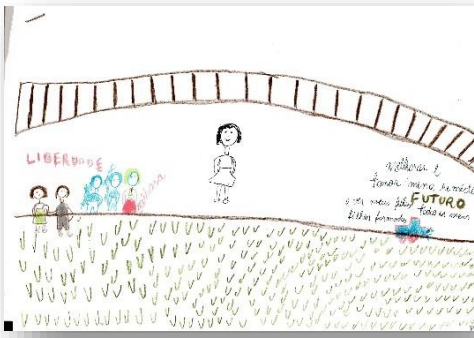
All participants from both groups (GDD and GTM) brought a connection and a path towards the dream of family unity and the reconstruction of family ties that were frayed along the trajectory of mental suffering. These findings of the GDD corroborate those found by Inoue et al. (2019), who describe that addicts, when adhering to treatment, begin to reflect on life and aim for healthier paths of their existence. An aspect that involves a more active conduct and protagonist of their change process, with more assertive choices of conduct, and behaviors in personal relationships (Valladares-Torres; Martins, 2023).

The bridge's lack of connection with the Earth may refer to the difficulty of GTM participants in staying connected with the harsh reality (Valladares-Torres, 2021b). Mental disorders and psychotic symptoms are chronic illnesses in which the person has difficulty connecting with reality and stability. In schizophrenia, for example, the person presents distortions of thoughts, feelings, perception, emotion, affection, behavior, interpersonal relationships, including social withdrawal, apathy, lack of volition, which influences the quality of life and the functionality of their daily lives (Almeida et al., 2024; Kong et al., 2024; Sarandöl et al., 2024). This aspect may justify the difficulty of GTM participants to reconnect the bridge to Earth – which here may represent reality.

Category II "Incorporation of the human figure"

In the DRM, there was less or no presence of the human figure (n=9). In the GTM, the presence of one or more human figures composing the image (n=20) appeared: one (n=7), two (n=4), three (n=3), four (n=2), six (n=2), nine (n=1) and ten (n=1). Although the human figures were not very expressive and in the shape of a toothpick (n=15), most of them were relatives, in addition to themselves (n=9). Chart 2 shows some drawings that illustrate category 2: "Incorporation of the human figure" of the two groups analyzed.

Table 2. Summarized general description of the predominant findings on the drawings of the two groups evaluated in category I: "Incorporation of the human figure". Brasília, Distrito Federal, Brazil. (n=2)

Drug Dependent Group (GDD)	Severe Mental Disorder (GTM) Group
	
<p>Figure 3. Authorship of the drawing: PGDD25, a 36-year-old man, an alcoholic, in a therapeutic proposal at the CAPS-ad for one month. Without affective company, he had two children, lived alone, incomplete elementary school and was unemployed.</p> <p>Title of the drawing: <i>Happiness.</i></p> <p>About the design: <i>my bridge (bus station and walkway) was made of concrete and metal, safe, happy, strong and hard, but which generates fear and anxiety. The bridge is a month old, but it's turning into another life, It came from a dark place and will lead to a happy place. I'm striving in my changes of habits to reach happiness.</i></p>	<p>Figure 4. Authorship of the drawing: PGTM4, a 49-year-old woman, diagnosed with schizophrenia, in a therapeutic proposal at the CAPS for one year. Separated, she had two children, lived with her family, attended incomplete elementary school and without a fixed income.</p> <p>Title of the drawing: <i>Better world.</i></p> <p>About the design: <i>the bridge is a walkway made of wood, it is cheerful, safe, friendly, strong, beautiful and hard. The bridge has an infinite age, it reminds us of freedom, strength, virtue and union. I consider myself a strong woman, with structure and a warrior similar to the bridge. I want to talk and think only forever with a loving future in the company of my children and grandchildren.</i></p>

Source: Survey data, 2025.

The male participant PGDD25 brings the bridge with the connotation of crossing, of passage from one state to another of his treatment. In his drawing, the participant represents a viaduct over a highway, vehicles on the bridge and its connection on one side the urban world and on the other the rural world, however, despite being a well-elaborated

drawing, with perspective and plot, it also represents the drawings of the GDD participants, with the absence of the human figure.

These factors can be supported by the citation of Silva and Lyra (2015), when they report that people seek, at the beginning of the consumption of psychoactive substances, socialization and pleasure, unlike when drug dependence is established, in which loneliness and social isolation prevail.

In the image of participant PGTM4, the presence of a scenario with the presence of several human figures, representing herself, two daughters, a son-in-law and two grandchildren, was observed, which illustrates the importance of family relationships. Even though it is a conflicting family, it is also the most significant support network in the lives of people in mental suffering.

Depression, anxiety, and schizophrenia disorders affect individuals, their families, and the individual's role in society (Andreasen; Olsen, 1982; Birgitta et al., 2018).

For many years, the family was excluded from treatment for people with mental disorders and it was understood that it was the producer of the disorder. However, currently, especially with the Psychiatric Reform, the approximation of the family in the treatment of mental disorders has emerged, considering it as an indispensable social actor for the effectiveness of care and having an important role in welcoming and resocializing its members (Borba et al., 2011). In this same study, after interviews with users, the family was considered as a support that people with mental disorders could count on, regardless of the difficulty they face, and a place where solutions to problems could be elaborated.

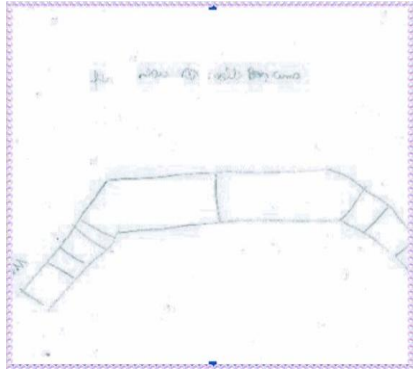

The authors also claimed that human beings are in relationships and cannot live in isolation, even with the qualities and limitations of people with severe mental disorders, they need to receive love, attention and affection (Borba et al., 2011). Given this perspective, it is believed that the presence of the human figure and family members in the GTM drawings is a way of drawing attention to the importance of these actors. As for the members of the GDD, most families have conflicting and degrading relationships and many break with the family and isolate themselves in peer groups or other territory (Borba et al., 2011).

Category III "Richness and color of elements in the scene"

In the GDD, there was a predominance of drawings with little or a discrete number of colors and elements (n=18), while in the GTM, the variety of elements, varied (n=17) and intense (n=18) colors predominated in this group. Chart 3 shows some drawings that

illustrate category III: "Richness and color of elements in the scene" of the two groups evaluated.

Table 3. Summarized general description of the predominant findings on the drawings of the two groups evaluated in relation to category III: "Richness and color of elements in the scene". Brasília, Distrito Federal, Brazil. (n=2)

Drug Dependent Group (GDD)	Severe Mental Disorder (GTM) Group
	
<p>Figure 5. Authorship of the drawing: PGDD4, a 28-year-old man, dependent on multiple drugs with alcohol, in a therapeutic proposal at CAPS-ad for two months. Single, without children, he lived with his mother, completed elementary school and without a fixed income.</p> <p>Title of the drawing: <i>I'm going to turn it around.</i></p> <p>About the design: <i>my metal walkway is sad, hard, safe, poor, ugly, strong, but also anxious and generates fear. The bridge is 11 years old. It reminds me of my past, my present and my future. A past in which I did a lot of wrong things, a present that I woke up to life and a future to feel joyful. I want to work and finish my studies.</i></p>	<p>Figure 6. Authorship of the drawing: PGTM9, a 34-year-old woman with depressive and anxiety disorder, in a therapeutic proposal at the CAPS for eleven months. Without affective company, she had four children, lived with her children, completed elementary school and had an informal job.</p> <p>Title of the drawing: <i>In the future to be happy.</i></p> <p>About the design: <i>it is a walkway made of wood, it is sad and happy at the same time, dangerous, it generates fear, because it is fragile. The bridge is 70 years old and at the moment it is cloudy and raining a lot. I think about the future, about the happiness of moving forward on the path. I came from a deep sadness and I am going towards happiness together with my family.</i></p>

Source: Survey data, 2025

It was found that, as a whole, the images created by the GTM participants had a greater composition of elements of the everyday scenario, such as the incorporation of the element tree, flowers, houses, birds, butterfly, grass, rain, clouds, sun and house (housing). On the other hand, in the drawings of the GDD participants, there was a simplification of elements and colors.



Colors represent the internal affective tonality of their authors (Furth, 2013), their emotions and subjectivity (Valladares-Torres, 2021a). If the colors and elements are limited, similarly, it occurs with the affective content of the GDD participants.

The authors Pessoa, Guimarães and Prado (2004) show that verbal demand is more withdrawn and impoverished in addicted men and verbalization is more concentrated on drug abuse and does not delve deeply into psychosocial conflicts. For the authors, these men have a stereotyped speech and focus on the harms of psychoactive substances and have a deficient self-identity. Valladares-Torres and Martins (2023) complement that drug addiction can make people more fragile, which keeps them connected to the most superficial people in their speeches and poverty of elements present in the drawings simultaneously.

Category IV "Presence of water"

In the GDD, there was a predominance of water below the bridge (n=19) and with a dark blue or green tone, the appearance of fish and boats (n=8). In the GTM, there was a predominance of river or sea (n=18). Chart 4 shows some drawings that illustrate category III: "Presence of water".

Table 4. Summarized general description of the predominant findings on the drawings of the two groups evaluated with regard to category III: "Presence of water". Brasília, Distrito Federal, Brazil. (n=2)

Drug Dependent Group (GDD)	Severe Mental Disorder (GTM) Group
	
<p>Figure 7. Authorship of the drawing: PGDD19, 42-year-old man, alcoholic and in therapeutic proposal at CAPS-ad for five months. Separated, he had two children, lived with his mother, incomplete elementary school and lived on benefits. Title of the drawing: <i>Radical</i>. About the design: <i>the bridge is a wooden walkway, it is hard, happy, safe and rich, but also fragile and generates fear and anxiety. The bridge is 45 years old. It's hard, but I'm trying to get through it. It reminds me of my journey through life from the world of drugs to a "clean" place. It reminds me of my willpower to cross and find a better life, full of peace and tranquility.</i></p>	<p>Figure 8. Authorship of the drawing: PGTM17, a 56-year-old woman with depressive disorder, in a therapeutic proposal at the CAPS for six months. Without affective company, he had two daughters and a grandson, lived with his daughters and grandson, completed high school and had an informal job. Title of the drawing: <i>Nature</i>. About the design: <i>it is a flying saucer made of gold. He is safe, friendly, strong, big, sophisticated and beautiful. In my past I only find sadness and about the future I only think about rolling forward and filling it with joy and happiness. I want to forget the past and be happy now and hope for a better future. I want to conquer my own home, have a lot of money,</i></p>

	<p><i>always be in contact with nature and be healthy. At the moment I am working, paying the bills, following the growth of my daughters and grandson and having a good family life.</i></p>
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Source: Survey data, 2025.

It was apprehended that, in general, in the drawings of the GDD participants, there was a predominance of water under the bridge. The drawings of the GTM participants showed the absence of the sea or river.

Water symbolizes the force of regeneration and the fertility of physical, psychic and spiritual life. Regeneration operates between the opposites of death and life, since it leads to a new rebirth, which favors the erasure of history and the establishment of a new state. It can also refer to the negative aspect with its destructive power (Chevalier; Gheerbrant, 2017).

Anxiety disorder is marked by changes in physiological, emotional, and cognitive aspects, and includes physiological hypersensitivity to stress, problems related to cognitive and emotional regulation, and a tendency to experience strong negative affects, such as nervousness, sadness, anger, among others (Clark; Watson, 1991).

Depressive disorder, on the other hand, is characterized by persistent sadness, loss of interest, and sleep disturbances, which profoundly affects users' quality of life and social roles (Xian, 2024). Depression is an important risk factor for suicidal thoughts and behaviors (WHO, 2019). Thus, from the perspective of the World Health Organization (WHO, 2020), depression is one of the main causes of disability in Brazil. Associated with the stigmas and internal and external (pre)concepts existing in the social imaginary (Monte; Raia, 2024) in relation to severe mental disorders and, frequently, mental health services, also help to delay the search for treatment and aggravate disorders and functional impairment in various domains of life of those affected (Smith, 2024).

The lack of water predominant in GTM participants may be related to the lack or loss of energy, vitality and strength of regeneration — of people with depression or limitations in executive skills, negative affects — of users with anxiety. In the same way, erasing a life trajectory marked by traumatic and negative events of people with severe disorders to be reborn to a new state – water function, becomes quite difficult.

The people of the GDD brought the bridge over the water with a tale of rite of passage and trial, similar to what rehabilitation imposes on them, due to the change in

behavior, attitude and the difficulty of staying away from the consumption of substances. Water exists, but as something dangerous to be crossed in order to be reborn.

FINAL CONSIDERATIONS

Through this study, it was possible to analyze and compare the drawings of people who are dependent on drugs and have severe mental disorders. And it was possible to highlight four main thematic categories, which addressed the connection of the bridge with the environment — going from the abyss to the connection, the incorporation of the human figure, the richness and color of the scene and the presence of water.

The participants of the group of drug addicts (GDD) brought drawings more connected to the earth, scarce presence of the human figure, less colorful and with few elements. Participants in the mental disorders group (GTM) presented images with more human figures, a more colorful and rich scenery in details and lack of water and connection of the bridge with other elements.

Overall, this study also showed that Art Therapy can be a practical approach to help people in mental distress, in both groups (GDD and GTM), to share and express aspects of their personal trajectory in a more creative and spontaneous way, than in purely verbal interviews. In addition, it facilitated the participants to find self-understanding, through the search for the meaning and perception of their life trajectory, activating their memory, organizing narratives and encouraging the expression of more detailed and in-depth information about themselves. Aspects that help in sharing internal emotions and promoting a greater sense of well-being.

It was noted that, despite the limitations that this study presented, such as having been developed with a small number of participants, it is believed that drawing the bridge in Art Therapy as a creative therapeutic resource brings important contributions and should be used more in the context of mental health.

It is hoped that this research can contribute to an advance in the knowledge about art therapy and its benefits, both for the population and for health professionals, especially the nursing team working in the CAPS.

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