

PART ONE

General Introduction

COPYRIGHTED MATERIAL

CHAPTER 1

Recent Developments and Interpretive Strategies

The *Comprehensive System* began to take shape in late 1971. The cumulative findings from a series of studies done between 1967 and 1970 had revealed that, although each of the five markedly different Rorschach systems (Beck, Hertz, Klopfer, Piotrowski, and Rapaport-Schafer) had considerable merit, each also contained features that could not be supported empirically. Consequently, a plan was formulated to integrate the empirically defensible features from each of those approaches into a format that could stand the test of scientific scrutiny and from which research regarding various issues of reliability and validity could proceed.

The first *Comprehensive System* manuscript was completed in late 1973 and published in 1974. It soon became clear, however, that the task was far from complete; what had looked like a fairly straightforward series of decisions in 1973 began to seem more like a never-ending project by 1977. Research completed from 1973 to 1977 suggested that some of the 1973 decisions needed to be revised or expanded, and although many newly completed studies offered clarification and elaboration, they also highlighted areas where further investigation was needed. The first edition of *Volume 2* was completed in late 1977 and published in 1978. It contained an update of research developments, expanded reference data, and some 21 cases illustrating the Rorschach's use with children, adolescents, and adults in a variety of clinical and forensic settings.

Over the next quarter century, the same sequence has repeated itself, now for the third time. A major revision of *Volume 1* was published in 1986, followed in 1990 by the second edition of *Volume 2*. Further revisions of *Volume 1* were released in 1993 and 2003, and this new work is the third edition of *Volume 2*. Like its predecessors, it provides an update: features that have been added to the *Comprehensive System* over the past few years, some new nonpatient reference data, and an extensive series of newly developed tables that detail the frequencies and some proportional data for developmental and form quality, blends, determinants, and contents for every location on every card. And like its predecessors, it contains a wide-ranging series of cases. They attempt to illustrate how the consolidation of accumulated research and experience that now defines the *Comprehensive System* allows empirically anchored personality descriptions that are of practical value in the clinical and forensic settings where assessment psychologists work. The second edition of *Volume 2* introduced the cluster approach, and this new work expands on that strategy for organizing the increasing amount of structural and content data that is available for interpretation. It also introduces a model for providing consultation, presented in Chapter 2, that describes two preliminary steps that can help focus the interpretation. The first involves formulating the case in terms of specific referral questions. The second involves a review of the relevant research literature as a way of directing the psychologist's attention to Rorschach data specifically pertinent for responding to those questions.

4 General Introduction

Some new features have been added to the *Comprehensive System* in the past few years, and this chapter begins with a description of these developments and their interpretive implications. It concludes with an updated summary of the cluster approach to organizing Rorschach data.

NEW VARIABLES AND INDICES

XA% and *WDA%*

The Extended Form Appropriate (*XA%*) is calculated as the sum of all +, *o*, and *u* responses divided by the total number of responses (*R*). The feature that all +, *o*, and *u* responses share is that they identify objects with characteristics that are appropriate for the chosen locations. The *XA%* provides information about the *source* of a person's data, that is, the proportion of responses guided by a reasonable use of the distal features of the blot. The coding for between 70% and 75% of +, *o*, or *u* responses reflects the fact that the shape of the object reported is generally commensurate with the contours of the location area selected, such as a butterfly to the whole of Card I, two people to the *D9* areas of Card III, or a totem pole to the *D3* area of Card VI. For the remaining 25% to 30% of +, *o*, or *u* answers, the coding indicates that other distal features of the location area such as color are consistent with the object reported, and there is *no significant distortion or disregard* of the form features of the location area selected. Many, but not necessarily all of these responses, will also be coded as *DQv*, such as blood to the *D3* area of Card II, clouds to the whole of Card VII, water to the *D5* area of Card VIII, or an island to the *D1* area of Card X.

The *WDA%*, which includes +, *o*, or *u* responses given to *W* or *D* locations, provides an even more precise measure, evaluating the appropriate use of blot features only for those locations whose relatively obvious distal features should increase the likelihood of readily identifiable choices. The *XA%* and *WDA%* can be contrasted with the *X-%*, the proportion of responses that show either partial or complete disregard for the external stimulus field and whose source increasingly is the person's internal psychology.

Whereas the *XA%* and *WDA%* are variables that represent a broad overview of the extent to which the distal features of the figures have been used appropriately in formulating answers, the *X+%* deals with a more specific issue. It is calculated using only + and *o* responses divided by *R*. Because + and *o* answers are defined as objects reported to *W* or *D* locations in at least 190 (2%) of the 9,500 protocols that comprised the sample used to develop the Form Quality Table or by at least two-thirds of the 50 or more individuals who used a particular *Dd* area, the *X+%* can be viewed as representing the extent to which the distal features of the figure have been identified in ways that are similar to those reported by a relatively substantial percentage of other people. As such, it is a measure of *conventionality*. A useful contrast here is with the *Xu%*. It is the proportion of answers in which the use of the distal features of the figure is appropriate, but the specific object(s) reported appear with a very low frequency in a large group of protocols and, as such, represent the more idiosyncratic and unconventional answers in a person's protocol.

Perceptual-Thinking Index (PTI)

The Perceptual-Thinking Index (PTI) replaces the Schizophrenia Index (SCZI) and brings both psychometric and conceptual improvements. The PTI is a nine variable index with five criterion tests as follows:

1. $XA\% < .70$ and $WDA\% < .75$
2. $X-\% > .29$
3. $LVL2 > 2$ and $FAB2 > 0$
4. $R < 17$ and $WSUM6 > 12$ OR $R > 16$ and $WSUM6 > 17$ (Adjust for age 13 and younger: If $R > 16$: 5 to 7 = 20; 8 to 10 = 19; 11 to 13 = 18 and if $R < 17$: 5 to 7 = 16; 8 to 10 = 15; 11 to 13 = 14)
5. $M- > 1$ OR $X-\% > .40$

The PTI substitutes $XA\%$ and $WDA\%$ for the $X+\%$ and $FQ-$ variables used in the SCZI and also includes some age and protocol length adjustments for the cognitive slippage special scores ($WSUM6$). These changes have considerably reduced the relatively high false positive rate that had characterized the SCZI, particularly with younger persons.

One study (Smith, Baity, Knowles, & Hilsenroth, 2001) investigated the PTI with 42 inpatient children and adolescents in a private psychiatric hospital specializing in acute short-term treatment. Using a >2 cutoff for the five-item PTI, the authors found that patients with higher PTI scores had significantly higher findings on measures of atypicality, reality distortion, hallucinations and delusions, feelings of alienation, and social withdrawal derived either from a parent rating scale (Basic Assessment System for Children—Parent Report Form [BASC-PRF]; Reynolds & Kamphaus, 1992) or from a self-report measure (Personality Inventory for Youth [PIY]; Lachar & Gruber, 1995). The authors conclude that “. . . the PTI may be a more pure measure of thought disturbance in children and adolescents than the SCZI” and that it “. . . may be assessing a more severe thought disturbance that not only has characteristics of cognitive slippage but may be marked by behavioral disturbance as well” (p. 458).

Ritsher (2004) studied 180 Russian adult psychiatric patients with clinically significant psychiatric impairment. Using a cutpoint of >2 , the PTI had a correct classification rate of 48% in discriminating patients diagnosed with schizophrenia from those diagnosed with depression. The false positive rate was quite low (3%).

From a conceptual standpoint, the change in name from “Schizophrenia Index” to “Perceptual-Thinking Index” emphasizes that the function of the PTI is not a diagnostic one. Rather, it is designed to indicate potential difficulties in two important areas of psychological function: reality testing and ideational clarity. As such, there is no longer a critical cutoff value for the PTI. It is a dimensional scale, with higher values that include both perceptual and ideational components directing the psychologist’s attention to these critical areas.

GHR:PHR

The good to poor human representation (GHR:PHR) variable had its roots in a review of the Rorschach literature on interpersonal function done by Perry and Viglione (1991). Using a group of relevant *Comprehensive System* variables, they created an algorithm that could classify human responses into one of two categories: positive/intact or negative/problematic. The algorithm demonstrated substantial criterion validity in discriminating individuals with well functioning relationships from those with less effective interpersonal histories (e.g., Burns & Viglione, 1996).

A study by Viglione, Perry, Jansak, Meyer, and Exner (2003) modified the algorithm. It focuses on responses that contain any human content coding [H , (H), Hd , (Hd), Hx], responses with the determinant M , or FM responses that contain either the COP or AG special scores, and categorizes

6 General Introduction

Table 1.1 Steps Used to Assign Good (*GHR*) or Poor (*PHR*) Designations to Human Representational Responses.

-
1. Score *GHR* for answers containing a Pure *H* coding that also *have all* of the following:
 - (a) Form Quality of *FQ+*, *FQo*, or *FQu*.
 - (b) No cognitive special scores except *DV*.
 - (c) No special scores of *AG* or *MOR*.
 2. Score *PHR* for answers that have either:
 - (a) *FQ* minus or *FQnone* (No Form), or
 - (b) *FQ+*, *FQo*, or *FQu* and have an *ALOG*, *CONTAM*, or any Level 2 cognitive special score.
 3. Score *GHR* for any remaining human representational answers that have the special score *COP*, *but do not* have the special score *AG*.
 4. Score *PHR* for any remaining human representational answers that have either:
 - (a) The special scores *FABCOM* or *MOR*.
 - (b) The content score *An*.
 5. Score *GHR* for any remaining human representational answers to Cards III, IV, VII, and IX that are coded Popular.
 6. Score *PHR* for any remaining human representational answers that have any of the following:
 - (a) The special scores *AG*, *INCOM*, or *DR*.
 - (b) An *Hd* coding [not (*Hd*) coding].
 7. Score *GHR* for all remaining human representational answers.
-

them as good or poor human representations (*GHR* or *PHR*) using the steps in the algorithm that are shown in Table 1.1.

An examination of steps 2, 4, and 6 of the algorithm highlights the aspects of interpersonal function that are associated with poor human representation codings. They include distortion, cognitive slippage, and a variety of aggressive, morbid, and somatic content. Conversely, steps 1, 3, and 5 demonstrate the accurate, logical, and intact features that define good human representation codings.

When a protocol contains at least three human representation answers, the relation of good to poor codings (*GHR*:*PHR*) allows a broad-based description of the effectiveness of a person's interpersonal function. If *GHR* is greater than *PHR*, it is likely that the individual handles interpersonal situations adequately and will be viewed by others in a relatively positive light. Alternatively, if *PHR* is equal to or greater than *GHR*, it is likely that the person's interpersonal function is less adaptive and that others will view him or her less favorably.

ORGANIZING RORSCHACH DATA BY CLUSTERS

Any interpretation of a Rorschach protocol must include careful consideration of all the data, but the steps through which the interpretation proceeds will not always be the same. The test data fall into three general groupings: the *Structural Summary*, the *Sequence of Scores*, and the *Verbalizations*. It is unfortunate but true that these three data sources vary considerably with regard to the breadth and sturdiness of the empirical foundations on which their interpretation rests. When each is scrutinized in the context of psychometric reality, it is the *Structural Summary* that typically constitutes the "hard data" of the Rorschach.

Although it is reasonable to expect that the structural data offer the greatest utility in forming interpretive hypotheses, those hypotheses can sometimes be too general, too narrow, or even misleading. Therefore, it is critically important that the other data groups are reviewed intelligently in the context of findings from the structural data. The Sequence of Scores often provides information that clarifies or expands postulates developed from the structural data, and in some instances unusual sequencing effects may give rise to new hypotheses. Similarly, while new hypotheses developed from the Verbalizations must be regarded with the utmost caution, the astute interpreter should be able to cull considerable information from the verbal material. Most postulates generated from verbal material are likely to have the greatest validity when derived from a composite of responses that are homogeneous for content or verbiage.

The interpretation should proceed cluster by cluster until all of the data have been exhausted. Although the first steps in addressing a cluster focus on the structural data, this does not mean that the Sequence of Scores and/or the verbal material are ignored until all possible hypotheses have been developed from the structural variables. On the contrary, issues will usually arise during the review of those variables that necessitate turning to the sequence and/or the verbal material before continuing with other structural variables.

This flexibility—moving from one data set to another—is crucial for a sophisticated interpretation of the test. This is because structural data on its own can be misused. It is not uncommon for the novice interpreter to draw premature conclusions from the value for a single variable. Such errors usually come from a faulty conception of test findings that disregards the fact that only a very few variables are independent of all other variables. Even more experienced interpreters can err by assuming that once the data for the structural variables in a cluster relating to a feature or function have been reviewed, no additional input is necessary and/or possible. Either of these errors promotes a concrete and simplistic use of the test that flirts with disaster and inevitably ignores a wealth of information that is available concerning the person's organization and functioning.

It is easy to understand how some errors in interpretive logic occur. Relatively large numbers of studies concerning each variable do encourage the notion that each has some discrete meaning. These studies tend to promote the idea that variables can be interpreted in isolation. Unfortunately, if such an approach is used, the result is a concrete and disconnected picture that at best fails to capture the organization of the person and at worst presents misleading or distorted conclusions. Even the discriminant functions, intercorrelational, and factorial studies that demonstrate that variables fall into clusters tend to convey the notion that each cluster of variables is somehow discrete and should be interpreted as such. Unfortunately, such an interpretive routine only serves to create a fragmented portrait of the person. Interpretation should evolve conceptually. Each finding should be integrated with other findings so that, ultimately, hypotheses and/or conclusions come from the totality of available information. In turn, these hypotheses and conclusions are synthesized logically with a careful view of the relationships between the numerous psychological features of the person. Any valid record contains some data that provides information about ideation, cognitive mediation, information processing, emotion, coping preferences and response styles, capacity for control, self-perception, and interpersonal perception. Most protocols will also include some information about routine defensive strategies. Thus, the challenge for the interpreter is twofold: first, to search methodically through all of the data concerning each component; second, to weave together the resulting yield in a manner that describes the total person.

VARYING STRATEGIES FOR INTERPRETATION

Once a protocol has been judged to be interpretively valid, a decision is required concerning the interpretive routine to be followed. The order in which each data cluster is evaluated varies from record to record, but it should never be random. The decision concerning the search order is not as simple as once seemed the case. During an earlier phase of development of the *Comprehensive System* (Exner, 1978), all interpretive routines began with a review of the data for four variables (*EB*, *EA*, *eb*, and *es*) that were called the Four Square. The rule of beginning with the Four Square was based on the logic that those four variables constituted the basic source of information regarding the core personality features of coping style and capacity for control. As such, that information would form a nucleus from which the interpretive routine would unfold naturally as each finding raised new issues to be addressed.

The practice of beginning the interpretation with the Four Square worked well for many records, but there were also many protocols in which hypotheses formed early in the interpretation required modification or, in some instances, abandonment as findings from other test data unfolded. This unexpected need to backtrack and reorganize hypotheses posed problems for the interpreter. It often required a change in set and a reintegration of findings, and it sometimes created confusion about how best to weigh findings in the total picture. Any of these challenges, if not properly addressed, risked sacrificing the richness of the interpretive yield.

In studying many protocols in which hypotheses generated from the data of the Four Square required modification, it became apparent that the recommended tactic for beginning interpretation had failed to appreciate two facts that had become much more apparent as research findings continued to unfold. First, while the *EB* does provide information regarding coping preferences, there are other stylistic features of the personality that can supercede that preference or have a more dominating impact on decisions and/or behaviors. Second, in some cases, the data of the Four Square may present a less accurate picture because other psychological features, usually pathological ones, have substantially altered the person's organization and/or functioning.

This problem was addressed by using a pool of 300 nonschizophrenic patient protocols. One hundred fifty records contained hypotheses developed from the Four Square that subsequently had to be modified or rejected because of other test data. In the remaining 150 records, used as a control group, hypotheses generated from the Four Square remained viable throughout the interpretive search. Frequency data for each of 241 computer-generated interpretive statements were tallied for the 300 records.

The records were then sorted into seven groups (controls or situational stress, affect, ideation, mediation, processing, self-perception, interpersonal perception), based on which cluster of variables yielded the largest number of statements for the record. One hundred forty-three of the 150 control group records sorted rather neatly into three groups (controls or stress, $N = 69$; ideation, $N = 36$; and affect $N = 38$). Interestingly, these three groupings drew extensively on the data of the Four Square. Five of the remaining seven protocols were sorted into the mediation group, one into self-perception, and one into processing. The sort of the 150 target group records was much more diverse (controls or stress, $N = 33$; ideation, $N = 21$; mediation, $N = 27$; processing, $N = 13$; affect, $N = 22$; self-perception, $N = 25$; interpersonal perception, $N = 9$).

A search program was then applied to determine if there were homogeneous data sets within each group that would differentiate it from the other groups. The results were very striking but not unexpected. For example, records sorted into the ideation group contained either an introversive

EB or evidence of markedly strange thinking. Records sorted into the controls or stress group contained a D Score lower than the Adjusted D Score, a minus Adjusted D Score, or a very low *EA*. Records sorted into the self-perception group all contained reflection responses, whereas those sorted into the processing group all had *Lambda* values of 1.0 or more, and so on.

The results of this search yielded 10 Key Variables which, when set in an order of dominance or priority, actually predicted the results of the sort for 282 of the 300 records. In other words, if a record contained only one positive Key Variable, it could be used to predict the cluster from which the largest number of statements would be generated. If a record contained two or more positive Key Variables, one had clear precedence in determining the sort and also could be used as a predictor. The 10 Key Variables, in their order of dominance, were: (1) Depression Index greater than 5, (2) D Score less than Adjusted D Score, (3) CDI positive, (4) Adjusted D Score in the minus range, (5) *Lambda* greater than .99, (6) at least one reflection answer, (7) *EB* introversive, (8) *EB* extratensive, (9) passive movement greater than active movement by more than one point, and (10) HVI positive.

The consistency for each of the groups provoked two additional sorts, again using the number of statements from each cluster as the basis for the differentiation. The results of the second and third sorts proved to be quite uniform and predictable from the first sort. For instance, if a record had been placed in the ideation group in the first sort, the second and third sorts almost always identified mediation and processing as yielding the next largest number of statements. Conversely, if a record initially had been sorted into the affect group, the clusters concerning self-perception and interpersonal perception invariably yielded the next largest number of statements.

In effect, the presence of a given Key Variable predicted which combination of two or three clusters of data would yield the largest number of statements from the pool of 241 statements. Stated differently, the Key Variables permitted the identification of the data sources that would contribute the most substantial information about the person's core psychological features. Generally, these are features that deserve considerable emphasis in forming a personality description. They are dominant elements of personality structure that have a major impact on psychological organization, exerting a significant influence on the way other features are expressed.

SELECTING THE INTERPRETIVE STRATEGY

The findings about Key Variables reaffirmed the notion that the interpretive search for all protocols should not follow the same sequence. It became clear that unique search strategies could be developed that allowed the interpretive routine to flow systematically, avoiding backtracking and reorganization of hypotheses. In such a format, the first data elements that are evaluated provide information concerning the predominant aspects of personality structure and/or response style. Thus, the decision about which cluster of data to use as the starting point is important, because its yield provides a context for the entire network of descriptive statements that will ultimately be generated. In turn, the first cluster selected typically provides direction for the order in which the remaining clusters are reviewed.

The details of the search strategy have evolved over the years, and the current sequence shown in Table 1.2 includes 12 Key Variables that can be divided conceptually into two groups. Six of the variables ($PTI > 3$, $DEPI > 5$, $D \text{ Score} < \text{Adjusted D Score}$, $CDI > 3$, and $\text{Adjusted D Score} < 0$) focus on the presence of potentially disorganizing psychopathology. The remaining six variables

10 General Introduction

Table 1.2 Interpretive Search Strategies Based on Key Variables.

Positive Variable	Typical Cluster Search Routine
PTI > 3	Processing > Mediation > Ideation > Controls > Affect > Self Perception > Interpersonal Perception
DEPI > 5 and CDI > 3	Interpersonal Perception > Self Perception > Controls > Affect > Processing > Mediation > Ideation
DEPI > 5	Affect > Controls > Self Perception > Interpersonal Perception > Processing > Mediation > Ideation
D < ADJ D	Controls > Situation Stress > (The remaining search routine should be that identified for the next positive key variable or the list of tertiary variables)
CDI > 3	Controls > Interpersonal Perception > Self Perception > Affect > Processing > Mediation > Ideation
ADJ D is	Controls > (The remaining search routine should be that identified for Minus the next positive key variable or the list of tertiary variables)
Lambda > 0.99	Processing > Mediation > Ideation > Controls > Affect > Self Perception > Interpersonal Perception
FR+RF > 0	Self Perception > Interpersonal Perception > Controls (The remaining search routine should be selected from that identified for the next positive key variable or the list of tertiary variables)
EB is Introversive	Ideation > Processing > Mediation > Controls > Affect > Self Perception > Interpersonal Perception
EB is Extratensive	Affect > Self Perception > Interpersonal Perception > Controls Extratensive > Processing > Mediation > Ideation
p > a+1	Ideation > Processing > Mediation > Controls > Self Perception > Interpersonal Perception > Affect
HVI Positive	Ideation > Processing > Mediation > Controls > Self Perception > Interpersonal Perception > Affect

(*Lambda* > .99, *FR+RF* > 0, *EB* introversive, *EB* extratensive, *p* > *a*+1, and HVI positive) describe entrenched personality styles, any of which can form the cornerstone of organization and functioning.

The Key Variables shown in Table 1.2 are listed in order of interpretive priority. In other words, the first positive Key Variable defines the sequence in which clusters are interpreted. Most of the sequences are straightforward, but in some cases the entire routine cannot be defined by simply using the first positive Key Variable. In that situation, subsequent Key Variables or Tertiary Variables must also be used to establish the complete routine. These sequences provide a path that allows each new finding to follow from those already developed.

The search sequences shown in Table 1.2 have been developed both empirically and logically. They are empirical in the sense that the first two or three clusters reviewed are likely to yield the greatest amount of information about the core features of the individual’s personality. They are logical in the sense that the sequence is designed so that each new finding merges neatly with those that precede it. It is important to note that the 12 search strategies are not entirely discrete. Three of the clusters—ideation, mediation, and processing—are always analyzed together because they describe different aspects of cognitive functioning. Likewise, the clusters pertaining to self-perception and interpersonal perception are always interpreted in tandem because of their interrelationship.

Table 1.3 Search Strategies Based on Tertiary Variables.

Positive Variable	Typical Cluster Search Routine
OBS Positive	Processing > Mediation > Ideation > Controls > Affect > Self Perception > Interpersonal Perception
DEPI = 5	Affect > Controls > Self Perception > Interpersonal Perception > Processing > Mediation > Ideation
EA > 12	Controls > Ideation > Processing > Mediation > Affect > Self Perception > Interpersonal Perception
M - > O or Mp > Ma or Sum6 Sp Sc > 5	Ideation > Mediation > Processing > Controls > Affect > Self Perception > Interpersonal Perception
Sum Shad > FM+m or CF+C > FC+1 or Afr < 0.46	Affect > Controls > Self Perception > Interpersonal Perception > Processing > Mediation > Ideation
X-% > 20% or Zd > +3.0 or < - 3.0	Processing > Mediation > Ideation > Controls > Affect > Self Perception > Interpersonal Perception
3r+(2)/R < .33	Self Perception > Interpersonal Perception > Affect > Controls > Processing > Mediation > Ideation
MOR > 2 or AG > 2	Self Perception > Interpersonal Perception > Controls > Ideation > Processing > Mediation > Affect
T = 0 or > 1	Self Perception > Interpersonal Perception > Affect > Controls > Processing > Mediation > Ideation

Although the search sequences dictated by each Key Variable nearly always define the most logical path for moving through Rorschach data, there are exceptions. As an example, Case 17 (Chapter 19) presents a situation in which findings early in the interpretive sequence suggested that the individual's reality testing and thinking difficulties had a significant affective component. Consequently, it seemed appropriate to alter the initial search strategy, which had listed affect as the last cluster to be analyzed.

If the protocol does not contain any positive Key Variables, a starting point can be identified from positive findings among the Tertiary Variables listed in Table 1.3. These variables typically point to the cluster that is likely to have the greatest yield, but they have less predictive power than the Key Variables for identifying the subsequent clusters that will contribute the most useful supplementary information.

A REVIEW OF THE VARIABLES THAT GUIDE SEARCH SEQUENCES

As noted previously, the purpose of the search sequences is to direct the psychologist's attention to those aspects of the data likely to produce the greatest interpretive yield. For that reason, if the person is 15 or older, the Suicide Constellation is always reviewed before moving to the search sequence identified by the first positive Key Variable. A review of the variables that dictate these search sequences highlights their importance in suggesting, for each individual, the organizing principle that allows an integrated description of his or her personality.

The Suicide Constellation

The Suicide Constellation (S-CON) should always be reviewed *before* beginning the interpretive routine if the patient is age 15 or older. Technically, it is not a cluster but rather an array of variables from several clusters which, as a collective, has an actuarial usefulness in identifying individuals with features similar to those who have effected their own death. Some groupings of items in the S-CON have a conceptual similarity, but the empirically developed listing as a whole does not.

The preliminary research on the S-CON (Exner, Martin, & Mason, 1984; Exner & Wylie, 1977) suggested that if the value for the S-CON is eight or more it should be concluded that the person does have features similar to those found in people who have committed suicide within a relatively short period of time after taking the Rorschach. A study by Fowler, Piers, Hilsenroth, Holdwick, and Padawer (2001) provides some justification for concern if seven or more of the S-CON variables are present. Using detailed medical record documentation extending up to 60 days after Rorschach administration, the authors classified the self-destructive behavior of a predominantly female inpatient sample into three categories: nonsuicidal, parasuicidal, and near-lethal. They found that an S-CON score of seven or more discriminated those patients who later made near-lethal suicide attempts from the other two groups. The S-CON cutoff of seven or more identified 81% of the patients who made near-lethal suicide attempts and 78% who did not, achieving an overall correct classification rate of 79%.

S-CON values less than seven or eight should not be automatically interpreted to mean that no self-destructive preoccupation exists. The false negative rate for this constellation ranges up to approximately 25%, and a review of all available history, interview, and test data is always indicated when evaluating self-destructive potential.

Perceptual-Thinking Index

As noted earlier, the Perceptual-Thinking Index (PTI) is not a diagnostic index but rather an indicator of the kinds of difficulties in perceptual accuracy and thinking that can have a pervasive impact throughout an individual's personality structure. PTI scores of four or five signal difficulties in both perceptual accuracy and thinking and suggest that findings from the Processing, Mediation, and Ideation clusters will play an important part in describing virtually every aspect of the individual's function.

Depression Index

Because the variables in the Depression Index (DEPI) are typically not directly related to observable behavior, Meyer and Archer (2001) concluded that “. . . psychologists should not use the DEPI on its own to diagnose a major depressive disorder from the *Diagnostic and Statistical Manual of Mental Disorders*” (p. 499). Instead, the DEPI serves to identify individuals who may be emotionally distraught, cognitively pessimistic, lethargic, or self-defeating.

Coping Deficit Index

A Coping Deficit Index (CDI) of four or five is a significant finding. Seven of the 11 variables in the CDI relate to interpersonal needs or deficits, while two of the remaining four variables seem to signal emotional avoidance or impoverishment. The other two variables indicate either poor

control capacity or limited coping resources. Thus, anyone with a value of 4 or more on the CDI is predisposed to functional disorganization, especially in unusual stress situations or those in which there are expectations for social/interpersonal effectiveness.

Two treatment outcome studies (Exner & Andronikof-Sanglade, 1992; Weiner & Exner, 1991) indicate that relatively extensive (8 to 14 months) of mental health intervention has the potential for lowering the CDI. Briefer interventions (2 to 3 months) demonstrated little effect on this variable.

Adjusted D Score Is Greater Than D Score

If the Adjusted D Score (Adj D) is greater than the D Score, the elevations on m and/or $SumY$ that created this difference signal the presence of situationally related stress. As the difference between D and Adj D become greater, it is increasingly likely that the impact of the stress will interfere with the person's customary task-oriented behavior. If the value for m is more than three times $SumY$, the stress is likely to have a more substantial effect on the person's attention and concentration. Conversely, if $SumY$ is more than three times m , the stress is likely to manifest with rather diffuse experiences of anxiety, tension, and helplessness.

Adjusted D Score

If the Adjusted D Score (Adj D) falls in the minus range, particularly as it moves toward -2 or below, it suggests potential problems in the effectiveness of the person's ongoing psychological function. These day-to-day problems often result from developmental difficulties that have produced a less mature form of personality organization than might be expected. Alternatively, an Adj D score in the minus range may indicate some psychological disintegration caused by a chronic stimulus overload state. In either event it suggests problems in both ideational and affective control that can set the stage for impulsive behavior.

The Key Variable finding of Adj D in the minus range does not predict well which clusters beyond Controls will offer the most salient information. For this reason, the decision concerning the remainder of the interpretive search must be based on a subsequent positive Key or Tertiary Variable.

Lambda

The finding that *Lambda* has a value of 1.0 or greater signals the presence of an *avoidant* response style, oriented toward reducing stimulus situations to their most easily managed level. This typically involves a narrowing or simplification of the stimulus field by ignoring its complex or ambiguous aspects. At best, this style may allow some sense of control by reducing the possibility of overload, and it is associated, for example, with schizophrenics who are able to avoid rehospitalization for longer periods (Exner & Murillo, 1977). But if the situation is intrinsically complex or ambiguous, avoiding some of its relevant elements can increase the likelihood of ineffective responses.

The behavior of individuals who have an *avoidant* style often conveys the impression that the simplification occurs at the input level. But this explanation does not seem viable in light of the fact that, as a group, high *Lambda* individuals do not show unusual distributions for Zf or DQv , and their frequency of underincorporation is only very slightly greater than individuals with *Lambda* findings below 1.0. A more logical explanation posits that the simplification is a defensive process through which some significant elements of the field are viewed as having little importance when

judged against the person's needs and the perceived demands of the situation. As such, those elements receive little or no attention in the formulation of responses.

Because a *Lambda* value of 1.0 or higher describes a pervasive response style, it is important to consider how it relates to the *EB*, which also provides data about preferred problem-solving approaches. High *Lambda* values tend to lower the complexity with which problems are engaged. As an example, the extratensive individual usually tests possible solutions through trial and error and then carefully differentiates the emotional feedback that different solutions engender. However, the *avoidant extratensive* does not take the time to differentiate this complex emotional feedback carefully, and the resulting behavior may be less effective and seemingly impulsive. Analogously, introversive individuals typically "think through" the costs and benefits of a variety of solutions quite carefully. However, the *avoidant introversive* may short-circuit this time-consuming process, arriving at simplistic solutions that are less likely to be adaptive. The *avoidant ambivalent*, with no secondary extratensive or introversive orientation, is likely to manifest less and less effective behavior as the complexity of demands increases.

Reflection Responses

The presence of one or more reflection answers triggers an interpretive routine that differs from those previously outlined, shifting the focus to self-concept and interpersonal issues. The reflection response is an important finding that, in adults, relates to a stable core characteristic of personality. It signifies the presence of a marked tendency to overvalue one's personal worth. Although not uncommon among younger children, these responses are not expected in the records of older adolescents or adults. If they do occur, it is very likely that the person will be strongly influenced by the need to support and defend this feature, and this drive will have a marked impact on many psychological operations.

In addition, the inflated sense of self cannot help but have a direct effect on the person's interpersonal world. To the extent that he or she is able to obtain reassurance and support from others, the likelihood of pathology decreases. But failure to receive affirmation can lead to elaborate defensive operations that include externalization of blame, rationalization, and denial.

Introversive or Extratensive Style

If the scan of Key Variables to this point does not define the interpretive routine, a review of the *EB* frequently will provide that identification. The presence of either of the predominant coping styles, introversive or extratensive, offers clear direction to the sequence of clusters that will provide the greatest interpretive yield.

The search of an introversive record begins with the cluster of variables concerning ideation and continues through the other clusters in the cognitive triad, processing and mediation. As already noted, the introversive style involves a preference for delay and thinking through alternatives before deciding on a response. The cognitive triad data will typically provide important information concerning the efficiency and effectiveness of that style. The routine continues through the clusters regarding controls and affects and ends with a review of data about self-perception and interpersonal perception.

If the *EB* indicates an extratensive style, the initial focus of the interpretive routine is quite different. It begins with the cluster concerning affect, as this style is one in which feelings play an

important role in making decisions. Extratensives solve problems by evaluating their emotional reactions as they try out a variety of solutions. Needless to say, the appropriate modulation of emotional discharge is often quite important to the integrity of the style.

***p* Is Greater Than $a+1$ or the Hypervigilance Index Is Positive**

If either of the remaining two Key Variables provides the basis for selecting the search strategy, an interpretive routine that emphasizes ideation will produce the most useful initial data. If p exceeds a by a value of more than one, it suggests that passivity is an integral psychological style that plays out in much of the person's thinking and behavior. The passive style usually serves any one of or a combination of several objectives. It can provide a convenient way to avoid complexity and responsibility, manifest a subtle aggressiveness, or perpetuate dependency. A positive HVI also points to a basic personality style. Individuals with this finding tend to be ill at ease in a world in which they see themselves as vulnerable. As a consequence they maintain a state of hyperalertness that is costly in two respects. First, a considerable energy commitment is required to sustain this level of anticipatory guardedness. Second, the orientation that gives rise to this hypervigilant apprehensiveness involves a more cautious or guarded set concerning others, which in turn can have a marked impact on interpersonal relationships. People who are hypervigilant are usually less trusting of others and preoccupied with matters of personal space.

The Within Cluster Analyses

As noted earlier, each Rorschach element, whether structural data, sequencing effects, or verbal material, ultimately contributes to the interpretation and *none* can be neglected. Each Rorschach protocol is unique in its total configuration, different from all other Rorschachs and illustrative of the idiography of the person who gave it. Thus, the process of interpretation involves a step-by-step sequence in which each new element is reviewed in the context of *all* previously examined data. It requires inductive and deductive reasoning. At almost every step, whether across clusters or within a cluster, hypotheses are developed that must be tested to the extent possible and confirmed, modified, or rejected. Much of this occurs during the within cluster analyses.

Once the interpretive search through a cluster begins, all of the data for the cluster is reviewed *before* turning to another cluster. This is to ensure that the postulates and/or conclusions that are developed about the feature being studied are as unambiguous and complete as possible and above all, that misleading sets or premature conclusions about the subject are not created. Clusters vary considerably in the breadth and/or depth of information concerning organization and functioning that they may provide. As a consequence, the specificity of propositions and conclusions that are derived also varies.

For example, there are only five variables that relate directly to issues of control and stress tolerance (the D Scores, *EA*, *es* and the CDI). Sometimes, the findings from this cluster will be quite specific, but in the majority of cases the yield will be little more than a general statement regarding the availability of resources and the capacity for control. On the other hand, seven structural variables [$3r+(2)/R$, $Fr+rF$, FD , $SumV$, MOR, $An+Xy$, $H:(H)+Hd+(Hd)$] plus a potentially sizable number of responses (any containing movement, MOR, or minus form quality) offer information about self-perception and thus, the yield of information concerning this feature often allows a highly idiographic description. This does not mean that the number of

Table 1.4 Order for Reviewing Variables within Each Cluster.

<p><i>Control and Stress Tolerance</i></p> <ul style="list-style-type: none"> Step 1. Adjusted D Score and CDI Step 2. EA Step 3. EB and Lambda Step 4. es and Adj es Step 5. eb <p><i>Situation Related Stress</i></p> <ul style="list-style-type: none"> Step 1. D Score in relation to es and Adj es Step 2. Difference between D & Adj D Scores Step 3. m & Y Step 4. T, V, 3r+(2)/R in relation to History Step 5. D Score (re Pure C, M-, M no form) Step 6. Blends Step 7. Color-Shading & Shading Blends <p><i>Affective Features</i></p> <ul style="list-style-type: none"> Step 1. DEPI & CDI Step 2. EB & Lambda Step 3. EBPer Step 4. Right Side eb & variables related to it Step 5. SumC':WSumC Step 6. Affective Ratio Step 7. Intellectualization Index Step 8. Color Projection Step 9. FC:CF+C Step 10. Pure C Step 11. Space responses Step 12. Blends (Lambda & EB) Step 13. m & Y blends Step 14. Blend complexity Step 15. Color-shading blends Step 16. Shading blends <p><i>Information Processing</i></p> <ul style="list-style-type: none"> Prerequisites (L,EB,OBS,HVI) Step 1. Zf Step 2. W:D:Dd Step 3. Location Sequencing Step 4. W:M Step 5. Zd Step 6. PSV Step 7. DQ Step 8. DQ Sequencing <p><i>Mediation</i></p> <ul style="list-style-type: none"> Prerequisites (R,OBS,L) Step 1. XA% & WDA% Step 2. FQnone Step 3. X-%, FQ- frequency, S- frequency <ul style="list-style-type: none"> a. Homogeneity issues b. Minus distortion levels Step 4. Populars Step 5. FQ+ frequency Step 6. X+% & Xu% 	<p><i>Ideation</i></p> <ul style="list-style-type: none"> Step 1. EB & Lambda Step 2. EBPer Step 3. a:p Step 4. HVI, OBS, MOR Step 5. Left side eb Step 6. Ma:Mp Step 7. Intellectualization Index Step 8. Sum6 & WSum6 Step 9. Quality 6 Spec Scores Step 10. M Form Quality Step 11. Quality of M responses <p><i>Self Perception</i></p> <ul style="list-style-type: none"> Step 1. OBS & HVI Step 2. Reflections Step 3. Egocentricity Index Step 4. FD and Vista (in relation to History) Step 5. An+Xy Step 6. Sum MOR Step 7. H:(H)+Hd+(Hd) & Review codings for Human Content responses Step 8. Search for projections in: <ul style="list-style-type: none"> a. Minus responses b. MOR responses c. M & Human Content responses d. FM & m responses e. Embellishments in other responses <p><i>Interpersonal Perception</i></p> <ul style="list-style-type: none"> Step 1. CDI Step 2. HVI Step 3. a:p Ratio Step 4. Food responses Step 5. Sum T Step 6. Sum Human Contents & Sum Pure H Step 7. GHR:PHR Step 8. COP & AG frequencies & codings Step 9. PER Step 10. Isolation Index Step 11. Contents of M & FM responses with pairs
--	---

variables in a cluster is directly related to interpretive specificity. On the contrary, the accumulated findings from variables within a cluster dictate where the resulting information falls on the general to specific continuum.

The within cluster analysis *always* begins with a review of the structural variables in the cluster because they are empirically derived. Table 1.4 on page 16 presents the sequence for reviewing variables within each cluster. Although the propositions generated from them are often more general, their validity is less subject to challenge, and typically they lead to the formation of hypotheses that give focus to the remainder of the cluster search.

SUMMARY

The importance of careful planning for the interpretive strategy used in approaching a protocol cannot be overestimated in relation to the *Comprehensive System*. An enormous number of variables are involved, and they should not be addressed in a random or haphazard manner. To do so risks the possibility of inadvertently neglecting important findings or failing to integrate data appropriately. Each person is a very complex entity, different from all other people. Similarly, each Rorschach is complex and different from all others. If the data of the Rorschach are addressed in a systematic and intelligent manner, the person's uniqueness will emerge as the interpretation evolves.

REFERENCES

- Burns, B., & Viglione, D. (1996). The Rorschach human experience variable, interpersonal relatedness, and object representation in nonpatients. *Psychological Assessment, 8*(1), 92–99.
- Exner, J. E. (1978). *The Rorschach: A comprehensive system: Vol. 2. Current research and advanced interpretation*. New York: Wiley.
- Exner, J. E., & Andronikof-Sanglade, A. (1992). Rorschach changes following brief and short-term therapy. *Journal of Personality Assessment, 59*(1), 59–71.
- Exner, J. E., Martin, L. S., & Mason, B. (1984). A review of the Rorschach suicide constellation. Paper presented at the 11th International Congress of Rorschach and Projective Techniques, Barcelona, Spain.
- Exner, J. E., & Murillo, L. G. (1977). A long-term follow-up of schizophrenics treated with regressive ECT. *Diseases of the Nervous System, 38*, 162–168.
- Exner, J. E., & Wylie, J. (1977). Some Rorschach data concerning suicide. *Journal of Personality Assessment, 41*(4), 339–348.
- Fowler, J. C., Piers, C., Hilsenroth, M. J., Holdwick, D. J., & Padawer, J. R. (2001). The Rorschach Suicide Constellation: Assessing various degrees of lethality. *Journal of Personality Assessment, 76*(2), 333–351.
- Lachar, D., & Gruber, C. P. (1995). *Personality Inventory for Youth: Technical guide*. Los Angeles: Western Psychological Services.
- Meyer, G. J., & Archer, R. P. (2001). The hard science of Rorschach research: What do we know and where do we go? *Psychological Assessment, 13*(4), 486–502.
- Perry, W., & Viglione, D. (1991). The Ego Impairment Index as a predictor of outcome in melancholic depressed patients treated with tricyclic antidepressants. *Journal of Personality Assessment, 56*(3), 487–501.
- Reynolds, C. R., & Kamphaus, R. W. (1992). *Behavior assessment system for children*. Circle Pines, MN: American Guidance Service.

18 General Introduction

- Ritsher, J. B. (2004). Association of Rorschach and MMPI psychosis indicators and schizophrenia spectrum diagnoses in a Russian clinical sample. *Journal of Personality Assessment*, 83(1), 46–63.
- Smith, S. R., Baity, M. R., Knowles, E. S., & Hilsenroth, M. J. (2001). Assessment of disordered thinking in children and adolescents: The Rorschach Perceptual-Thinking Index. *Journal of Personality Assessment*, 77(3), 447–463.
- Viglione, D., Perry, W., Jansak, D., Meyer, G. J., & Exner, J. E. (2003). Modifying the Rorschach Human Experience Variable to create the Human Representational Variable. *Journal of Personality Assessment*, 81(1), 64–73.
- Weiner, I. B., & Exner, J. E. (1991). Rorschach changes in long-term and short-term psychotherapy. *Journal of Personality Assessment*, 56(3), 453–465.