
*Rorschach Assessment of Personality
Disorders: Applied Clinical Science
and Psychoanalytic Theory*

Marvin W. Acklin
University of Hawaii at Manoa

Susan H. S. Li
James Tyson
Argosy University, Honolulu

The genius and enduring value of the Rorschach Test to the psychodiagnostician is its ability to speak in the aboriginal language of the mind. (Acklin & Oliveira-Berry, 1996)

The current *Diagnostic and Statistical Manual of Mental Disorders, 4th Edition, Text Revision (DSM-IV-TR; American Psychiatric Association, 2000)* defines personality traits "as enduring patterns of perceiving, relating to, and thinking about the environment and oneself that are exhibited in a wide range of social and personal contexts." Personality traits "characterize an individual's functioning" (p. 686). When these characteristic ways of experiencing and behaving become rigid, maladaptive, or otherwise dysfunctional, and the outcome is "significant functional impairment or subjective distress," they are defined as a personality disorder (p. 686). The DSM-IV-TR personality disorder criteria describe the enduring pattern as "pervasive involving cognition, affectivity, interpersonal functioning, or impulse control, across a broad range of personal and social situations, causing significant distress or impairment, and of stable or long-term duration." Assessment of personality disorders "requires an evaluation of the individual's long-term patterns of functioning" (p. 686) and "the particular personality features must be evident by early adulthood" (p. 686).

The DSM-IV conceptualization of personality and personality disorders is the outcome from a long tradition of thinking about personality development and functioning (McWilliams, 1994; Tyson & Tyson, 1990). This tradition originates in Freud's psychosexual stage and structural theories, developments in psychoanalytic ego psychology and characterologic theory, object relations theory, and, with the emphasis on standardization and psychometric acceptability, a shift toward the observable behavioral or interpersonal aspects of personality functioning and disorder. In the following sections, conceptual and methodologic issues important to consider in assessing personality disorders will be discussed. Psychoanalytic theory and the Rorschach Inkblot Test's contribution to understanding about an individual's subjective experience, personality organization, and disorders are presented. This information may be evaluated through both nomothetic and ideographic approaches within an integrated heteromethod approach to personality assessment. It is suggested that the Rorschach Inkblot Test is a valuable tool for capturing the internal psychodynamics of the individual and his or her personality organization, functioning, and experience.

PERSONALITY ASSESSMENT AND DIAGNOSIS: NATURE AND RATIONALE OF THE ASSESSMENT TASK

The American Psychological Association's (APA) Board of Professional Affairs established a Psychological Assessment Work Group and commissioned it (a) to evaluate contemporary threats to psychological and neuropsychological services and (b) to assemble evidence on the efficacy of assessment in clinical practice. In their report, Meyer et al. (2001) described the purposes and appropriate application of psychological assessments and provide a broad overview of testing and assessment validity. They described the scope and goals of psychological assessment as follows:

1. To describe current functioning, including cognitive abilities, severity of disturbance, and capacity for independent living
2. To confirm, refute, or modify the impressions formed by clinicians through their less structured interactions with patients
3. To identify therapeutic needs, highlight issues likely to emerge in treatment, recommend forms of intervention, and offer guidance about likely outcomes
4. To aid in the differential diagnosis of emotional, behavioral, and cognitive disorders
5. To monitor treatment over time, to evaluate the success of interventions, or to identify new issues that may require attention as original concerns are resolved

6. To manage risk, including minimization of potential legal liabilities and identification of untoward treatment reactions
7. To provide skilled, empathic assessment feedback as a therapeutic intervention in itself. (p. 129)

Within the scope of personality assessment items 1 to 4 are of obvious importance to the psychodiagnostician.

Meyer et al. (2001) clarified the critical distinction between "psychological testing" and "psychological assessment":

Psychological testing is a relatively straightforward process wherein a particular scale is administered to obtain a specific score (e.g., a scaled subtest score on a Wechsler scale). Subsequently, a descriptive meaning can be applied to the score on the basis of normative, nomothetic findings. In contrast, psychological assessment is concerned with the clinician who takes a variety of test scores, generally obtained from multiple test methods, and considers the data in the context of history, referral information, and observed behavior to understand the person being evaluated, to answer the referral questions, and then to communicate findings to the patient, his or her significant others, and referral sources. (p. 143)

Psychological assessment is a task that uses test-derived information in combination with the patient's historical data, presenting complaints, and interview results, along with information derived from behavioral observations and third parties to disentangle competing diagnostic possibilities. The process is "far from simple and requires a high degree of skill and sophistication to be implemented properly" (p. 144).

Psychological assessment includes a wide range of information sources that provide distinctive types of information (McClelland, 1980). A summary of these methods and their limitations is presented in Table 16.1. Notably, performance-based personality tests, such as the Rorschach Test, elicit data about behavior in unstructured settings or implicit dynamics related to an understanding of perception and motivation. These types of tests, however, are limited by the individual's engagement in the task and the specific stimulus materials used in the task.

Thus, the assessment clinician establishes an evaluation framework that systematically develops information concerning the client's personality functioning using multiple information sources and methods. None of the ordinarily used sources or methods is without its drawbacks. As discussed later, concordance levels between sources and methods are low because various sources and methods of assessment provide independent and distinctive information about the individual being assessed. The challenge is to understand how information may be integrated into meaningful personality description, assessment, and diagnosis.

TABLE 16.1
Meyer et al.'s (2001) Range of Assessment Methods and Their Constraints

<i>Method</i>	<i>Constraints</i>
Unstructured interviews	Range of topics considered and ambiguities in the interpretation of this information
Structured interviews and self-reports	Patient's motivation to communicate frankly and his or her ability to make accurate judgments
Performance-based personality tests (e.g., Rorschach, TAT)	Patient's engagement in the task and the nature of the stimulus materials
Performance-based cognitive tests	Patient's motivation, task engagement, and setting
Observer rating scales	Parameters of the particular type of relationship (e.g., spouse, coworker, therapist) and the setting in which observations are made

Taken from Meyer et al. (2001). Psychological testing and psychological assessment: A review of evidence and issues. *American Psychologist*, 56, 128-165.

PSYCHOLOGICAL ASSESSMENT AS APPLIED CLINICAL SCIENCE

The scientist-practitioner approach (i.e., Boulder model) to psychological assessment is established on foundations of scientific procedure and informed by empirical research findings. Shakow (1976) described the scientist-practitioner psychologist as

A person who, on the basis of systematic knowledge about persons obtained primarily in real-life situations, has integrated this knowledge with psychological theory, and has consistently regarded it with the questioning attitude of the scientist. In this image, clinical psychologists see themselves combining the idiographic and nomothetic approaches, both of which appear to them significant. (p. 554)

In this context, practice is "strictly an applied scientific activity, with praxis dictated by a sound body of scientific knowledge" (Stricker & Trierweiler, 1995, p. 996). "The clinical setting can be regarded as a laboratory for the clinician and must be approached with the same discipline, critical thinking, imagination, openness to falsification, and rigor that characterizes the scientist in the traditional laboratory" (p. 998). Through the context of discovery (Reichenbach, 1938), initial hypotheses are derived from referral questions, assessment methods are selected and administered (Acklin, 2002), and hypotheses are initially tested, accepted, and rejected.

Through the more rigorous logic of justification (Reichenbach, 1938), careful integration of source material using a nomothetically based and idiographically applied configurational approach (Stricker & Gold, 1999) permits the refinement of inferences and development of conclusions. The integration of scientific values and modes of thought "leads to the generation of internally consistent formulations that are consistent with all extant data, both local and more general" (Stricker & Trierweiler, 1995, p. 998).

Scientifically based assessment includes at least three elements. First, it involves the application of a *heteromethod* procedural methodology that integrates sources and methods of clinically relevant information into a unified description of the individual being assessed (Stricker & Gold, 1999). Second, scientifically based assessment considers nomothetic and idiographic aspects of analysis:

The *nomothetic* approach to assessment is part of the science of psychology's search for lawful relationships in human behavior.... An *idiographic* approach to assessment is aimed at understanding the singular ways in which many characteristics fit together within the context of the life of one person. (p. 240)

Scientifically based assessment psychology has come to recognize a relatively low degree of association between differing data sources in personality assessment and diagnosis. Meyer (2002) wrote that, "sophisticated clinicians and researchers should expect associations of about .20 to .30 between alternative data sources, and this should fuel the motivation to systematically gather data from multiple independent sources whenever an accurate understanding of the patient is required" (p. 89). He noted further:

Cook and Campbell (1979) illuminated how the construct validity of nomothetic research can be seriously compromised by monomethod or mono-operation bias. As such, optimal nomothetic research maximizes construct validity by obtaining data from multiple methods of assessment, multiple sources of information, and multiple operational definitions of the target construct. (p. 90)

Third, critical thinking is essential to scientifically disciplined psychological assessment. Focus on the falsifiability of hypotheses and consideration of alternative hypotheses are an aspect of critical thinking and an antidote to common biases and heuristics that weaken clinical judgment (Garb, 1994a, 1994b; Garb 1996; Garb, 1998). To promote sound clinical thinking, Meyer (2002) concluded that clinicians should seek to minimize monomethod and mono-operational bias in their clinical work by synthesizing information gathered from multiple sources consistent with the recommendations of Stricker & Gold (1999). By creating multiple sources of information in an assessment paradigm designed to elicit unique re-

sponse configurations, clinicians operate within a classical view of test battery administration (Acklin, 2002; Rapaport, Gill, & Schafer, 1968). That is, varying methods of source information replicate the convergent and discriminant validation (Campbell & Fiske, 1959) process in the formation, refinement, and acceptance of inferences emerging from the data sources (Wiggins, 1973).

PERSONALITY ASSESSMENT AND THE INNER WORLD

Personality functioning is not limited to publicly observable aspects of behavior. Millon (1969) defined personality as "those intrinsic and pervasive modes of functioning which emerge from the entire matrix of the individual's developmental history, and which now characterize his or her perceptions and ways of dealing with the environment" (p. 221). In another context, Millon (1981) defined personality "as a complex pattern of deeply embedded psychological characteristics that are largely unconscious, cannot be eradicated easily, and express themselves automatically in almost every facet of functioning ... individual and pervasive these traits comprise the individual's distinctive pattern of perceiving, feeling, thinking, and coping" (p. 8).

Thus, personality encompasses the subjective experience of the individual. Subjective experience encompasses the primary fact that humans inhabit bodies (derived from Freud's [1961] notion that "the ego is first and foremost a bodily ego," p. 26; Lakoff & Johnson, 1999); the feeling life and motives (i.e., wishes, fears, anticipations); and the welter of inner subjectivity (i.e., what psychoanalysts call unconscious fantasy or psychic reality, Arlow, 1985; Solorow & Atwood, 1989). Inner experience is revealed in the stream of consciousness, fantasy, memories, dreams, beliefs and attitudes, and creative products in the arts and humanities. As such, an experiential or phenomenologic approach to the self is necessary for an understanding and full appreciation of persons.

The self is the locus of affective experience, sense of agency, and basis of self-awareness and reflectivity (Blatt & Bers, 1993). "The experiences of affect, agency, and reflective self-awareness define the self in ways that are consistent with the experiential aspects of traditional psychoanalytic thought, such as the topographical model with its specifications of consciousness and awareness" (p. 172). The raw material and aboriginal language of human subjectivity is fantasy. Fantasy life has been described from a variety of theoretical concepts (Pine, 1988): imagoes (Josephs, 1989), complexes (Jacobi, 1999), object representations (Kernberg, 1976), internalized working models (Carlson & Sroufe, 1995), and more lately, from a cognitive perspective, schemas (Blatt, 1995). Blatt asserted that

"various forms of psychopathology in adults are determined, in large part, by differential impairments of the schemas of the representational world that occur as a consequence of serious disruptions of the relationships between child and caregivers" (p. 1).

The role of the unconscious, a concept rejected as a factor in mental life during the short-lived hegemony of behaviorism and scientism of the 1960s, has been resurrected (Epstein, 1994; Greenwald, 1992). The inner, intrapsychic life of the individual forms the substrate for observable behavior and thoroughly pervades it. As such, the inner life and methods for assessing its dynamics are critical to the psychodiagnostic task. The pervasiveness of the inner life and the way in which "the interpersonal and the intrapsychic realms create, interpenetrate, and transform each other in a subtle and complex manner" (Mitchell, 1988, p. 9) are the basis for the "projective hypothesis" (Frank, 1939). All aspects of a person's perceptions, feelings, attitudes, beliefs, and behavior are intertwined to form a unity (Rapaport et al., 1968). Consequently, knowledge concerning the inner life of the individual is crucially relevant for understanding an individual's experience and behavior and in the psychodiagnostic assessment and diagnosis of personality and personality disorders.

OBJECT RELATIONS THEORY AND THE REPRESENTATIONAL WORLD

With the advent of psychoanalysis, Freud and his followers laid down theoretical postulates concerning psychological development (McWilliams, 1994; Tyson & Tyson, 1990) represented in the psychosexual stages of libidinal development and intrapsychic structuralization. Developments in psychoanalytical ego psychology further refined the structural-developmental approach to understanding inner experience (Blanck & Blanck, 1975) and laid the foundation for the object relations theories of Klein, Guntrip, Fairbairn, Sandler, and others (Urist, 1980). More recently, with a shift toward cognitive psychology, developmental factors are less emphasized, and greater emphasis is given to internalized images or representations of self and others, represented in cognitive psychology as schemas and in attachment theories as internalized working models.

In a classic contribution, Sandler and Rosenblatt (1962) described the concept of the representational world. In reference to Freud's ideas about the superego, Sandler and Rosenblatt quote Freud (1940/1964) who wrote that at about the age of 5 years,

a portion of the external world has, at least partially, been given up as an object and instead, by means of identification, taken into the ego—that is, has become an integral part of the internal world. This new mental agency con-

tinues to carry on the functions which have hitherto been performed by the corresponding people in the external world. (p. 131)

Sandler and Rosenblatt (1962) noted that the developing child "creates, within its own perceptual or representational world, images and organizations of his internal as well as external environment" (p. 132). They write that "a representation can be considered to have a more or less enduring existence as an organization or schema which is constructed out of a multitude of impressions" (p. 133). The internalization of object relations refers "to the internalization of units of affective state, object representation, and self-representation" (Kernberg, 1976, p. 75). The organization and developmental maturity of the representational world—based on the internalization of early life relational scenarios—establishes the individual's character (Kernberg, 1976; Shapiro, 1965).

Personal life is characterized by consistency and repetitiveness of states of mind that give a quality of consistency to the personality. In a global sense, these engrained predispositions to perceive, feel, and behave constitute a person's character and identity. Moore and Fine (1968) defined character as

that aspect of personality ... which reflects the individual's habitual modes of bringing into harmony his own inner needs and the demands of the external world. It is a constellation of relatively stable and constant ways of reconciling conflicts between the various parts of the psychic apparatus to achieve adjustment in relation to the environment. Character therefore has a permanent quality that affects the degree and manner of drive discharge, defenses, affects, specific object relationships, and adaptive functioning in general. (p. 25)

Atwood and Stolorow (1980) linked character to the representational world:

We propose that a strictly psychoanalytical description of a person's character is always a description of his representational world (i.e., of those distinctive, archaically determined, affectively colored configurations of self and object representations which recurrently and unconsciously structure the person's subjective experiences and conduct). (p. 280)

Subsequently, Atwood and Stolorow (1984) stated that "personality structure is the structure of a person's experience" (p. 33), and that "character is coextensive with the structure of a subjective world" (p. 34). They added that character structure is not merely a passive template for perceiving, but a proactive program from acting in the world. On this point, Shapiro (1968) wrote:

The neurotic person does not simply suffer neurosis, as, essentially, one suffers tuberculosis or a cold, but actively participates in it, functions, so to speak, according to it, and, in ways that sustain its characteristic experiences; he sees, at any point, no serious alternative to whatever particular act or interest has just this effect. (p. 20)

The object or representational world operates as a guidance system for perceiving, thinking, feeling, and acting. Building on Fairbairn's notions that internalized objects are crystallized experiences deriving from negative early relationships, Rubens (1994) wrote about the active and dynamic nature of object relations:

Such a subsystem seeks at all times to express itself and have experience in accordance with the template based on the formative *intolerable* experiences which define its existence. Thus the existence of such an endopsychic structure leads to the seeking of relationships that will be consonant with the specific neurotic paradigms of early experience, to the distortion of current relationships so they can be experienced in accordance with such paradigms, and to the patterning of activity in the world so as to be expressive of such a relationship. (p.163)

Consistent with Fairbairn's notion of crystallization of negative early experience and the link between character and behavior, Kernberg (1976) wrote:

The final outcome of pathological identification processes is character pathology. The more rigid and neurotic the character traits are, the more they reveal that a past pathogenic internalized object relation (representing a particular conflict) has become "frozen" into a character trait. (p. 79)

Although these theoretical constructs focus on the development and substance of mental and emotional life, they are relevant to the lived experience of the person because they reflect phenomenologic dimensions of fantasy, feeling, perception, and enactment.

EGO STATE AND OBJECT RELATIONS THEORIES

Ego state theory emerged from the work of Federn (1952) and others, reflecting the singular importance of subjective experience as a clinical construct of psychodiagnostic importance. Ego states are experiential states of feeling, perception, and thought, which form the basis of a person's enactments in interpersonal situations. Of particular relevance to Rorschach psychology, Horowitz (1983) discussed modes of representation of thought: enactive, image, and lexical. Imagistic modes of representation are represented in "introjects, fantasies, body images, and relationships

between objects" (p. 86). Object representations consist of "important transactions [that] will be repeated and, with repetition, will gain in structural clarity and development so that they come to act as organizers of new information" (p. 87). Horowitz (1998) extended the concept of ego states to states of mind, which reflect a "combination of conscious and unconscious experience with patterns of behavior that can last for a short or long period of time. Each person has a repertoire of recurrent states of mind]" (p. 13).

States of mind are characterized by feeling, perception, level of regulation (undermodulated, overmodulated, well-modulated, and shimmering), type of motivation (wished for or dreaded states), and person schemas (Horowitz, 1998, p. 15). States of mind differ from "one another not only in terms of prevailing emotion or expressed feelings, but in the apparent style or the degree of control" (Horowitz, 1988, p. 13). Person schemas, synonymous with object representations, "remain as relatively unchanged in the mind even after the external aspects of the relationship are over" (Horowitz, 1991, p. 14). Person schemas have particular relevance for normal personality functioning and disorder. They demonstrate stable properties (Horowitz, 1988) and summarize past experience into "holistic composite forms, thus allowing incoming information to be measured against the existing composite for goodness of fit" (p. 13). Schemas that accord well with real stimuli "permit rapid organization of information;... schemas enhance stimuli that fit the schematic view and impede recognition of stimuli that do not" (p. 14). Whereas reification of schemas enables "rapid perception;... it may also lead to patterned and recurrent errors in interpreting and responding to stimuli that are actually different from schematic forms" (p. 14). This is of central significance for personality functioning, particularly in the case of personality disorders:

Schemas of self and others enhance a sense of temporal continuity and coherence of identity. Conversely, aschematic conditions seem to lead to a loss of coherence of identity, experienced subjectively and symbolically as fragmentation of self and a loss of location of self in time. (Horowitz, 1988, p.14)

Clinicians have proposed a variety of taxonomies for classifying personality organization and functioning. Horowitz (1998) proposed a five-level system, focusing on structural features that characterize intrapsychic functioning and interpersonal behavior reflecting states, controls, and person schemas: (a) well-developed, (b) neurotic, (c) narcissistically vulnerable, (d) borderline, and (e) fragmented. Of interest is Horowitz's insistence that these are not merely dispositional categories for third-party observation and classification, but features of the person's subjective experience of self and others.

Psychoanalytic developmental diagnosis is derived from theoretical foundations of classic drive theory, ego psychology, and object relations the-

ory (Blanck & Blanck, 1975; Pine, 1990; Tyson & Tyson, 1990). Object relations theory focuses on internalized representations of self in relation to others and views character style as an attitudinal expression of these internalized object relations (Josephs, 1992). Kernberg (1976) integrated these notions in a psychoanalytic classification of character pathology with his tripartite classification of personality organization: neurotic, borderline, and psychotic. In Kernberg's framework, the organization of character pathology is based on the solidity of identity formation, quality and structural integrity of object representations, level of defensive operations, and proneness to regression and infiltration of primary process modes of thought.

Kernberg (1984) wrote:

Neurotic, borderline, and psychotic types of organization are reflected in the patient's overriding characteristics, particularly with regard to (1) his degree of identity integration, (2) the types of defenses he habitually employs, and (3) his capacity for reality testing. I propose that neurotic personality structure, in contrast to borderline and psychotic personality structures, implies an integrated identity. Neurotic personality structure presents a defensive organization centering on repression and other advanced or high-level defensive operations. In contrast, borderline and psychotic structures are found in patients showing a predominance of primitive defensive operations on the mechanism of splitting. Reality testing is maintained in neurotic and borderline organization but is severely impaired in psychotic organization. These structural criteria can supplement the ordinary behavioral or phenomenological descriptions of patients and sharpen the accuracy of the differential diagnosis of mental illness, especially in cases that are difficult to classify (pp. 5-6).

In Kernberg's (1976) framework, severity of personality disorder is not limited to symptom presentation or outwardly observable behavior (as in the DSM), but includes underlying intrapsychic organization. Most hysterical, obsessive-compulsive, and depressive-masochistic characters are organized at the higher (neurotic) level of personality organization. Borderline, narcissistic, paranoid, schizoid, and psychopathic personalities may overlap both borderline and psychotic personality structures. These levels of personality organization, which are assessed through external means (behavior and modes of feeling, perceiving, and relating), also reflect modes of subjective experience.

THE RORSCHACH TEST'S CONTRIBUTION TO PERSONALITY ASSESSMENT AND DIAGNOSIS

Rorschach test interpretation is most effective when it is *integrative* (Acklin, 1994; Meloy, Acklin, Gacono, Murray, & Peterson, 1997), that is,

when interpretation combines structural data with a nomothetic basis (e.g., empirically derived ratios, percentages, and indices) and theoretically derived content analyses with idiographic referents (Weiner, 2003). Despite recent controversies, the Comprehensive System (CS; Exner, 2003) for the Rorschach (Garb, Wood, Lilienfeld, Scott, & Nezworski, 2002; Lilienfeld, Wood, & Garb, 2000; see Acklin, 1999; Meyer, 2000; Viglione & Hilsenroth, 2001 for responses to these criticisms) remains the primary source of empirically derived and validated structural data for personality description. There is a voluminous empirical literature focusing on various personality constructs and Rorschach indices, percentages, and ratios.

Using "sign" approaches to Rorschach assessment, several recent studies have found that certain Rorschach variables are related to DSM-IV Axis II personality disorder criteria. For example, Hilsenroth, Hibbard, Nash, and Handler (1993) found that Rorschach measures of defenses and aggression effectively discriminated narcissistic personality patients from a nonclinical sample and from DSM-IV cluster A, cluster C, and other cluster B personality disorders. Blais, Hilsenroth, and Fowler (1998) reported that color balance (FC+CF+C) and texture codes (T) were strongly correlated with histrionic personality disorder (HPD). In addition, these two Rorschach variables were significantly correlated with seven of the eight HPD criteria. The total number of Rorschach color responses (FC+CF+C) was positively correlated with DSM HPD criteria (2, 3, 4, and 5), whereas texture responses were positively correlated with criteria (1, 5, 6, 7, and 9; Blais & Hilsenroth, 1998).

In a follow-up study, Blais, Hilsenroth, Castlebury, Fowler, and Baity (2001) explored the incremental validity of Rorschach variables relative to Minnesota Multiphasic Personality Inventory-2 (MMPI-2) personality disorder scales (Colligan, Morey, & Offord, 1994; Morey, Waugh, & Blashfield, 1985) in predicting DSM-IV cluster B criteria. In this study of 57 psychiatric outpatients, two Rorschach variables (FC+CF+C and T) performed incrementally above and beyond the MMPI-2 HPD scales in identifying DSM-IV HPD criteria. In fact, when both MMPI-2 scales and the Rorschach variables were entered simultaneously into the regression equation, only the Rorschach variables were independent predictors of the DSM-IV HPD criteria.

Theoretically derived approaches to the Rorschach test broaden the test's application to personality assessment and diagnosis (Frank, 1995a; Lerner, 1991; Pine, 1988; Rosenen, 1990; Schafer, 1954). Bridging the gap between experience, percept, and score, Schafer's (1954) ego psychological approach focused on thematic analysis of individual responses as highly revealing of styles of thought and feeling. Reflecting on the nature of projection in approaching Rorschach inkblots, Schafer regarded the subject's "perceptual styles as enduring, integrated response tendencies which have remained in the service of and reflect enduring configurations

of drives, defenses, and adaptive efforts, and the imagery with which these are associated" (p. 115). Combining both drive and ego psychological perspectives, the work of Robert Holt (1970) has particular relevance for the Rorschach test in terms of studying and understanding the subjective experience of persons, with specific reference to Rorschach assessment, classification and psychodiagnosis of personality disorders. Holt and colleagues (Holt, 1970; Holt & Havel, 1960) devised a comprehensive scoring system for Rorschach percepts that illuminates the content, structural, and defensive features of responses to the cards. Holt focused on the role of primary process thinking and associated defensive functioning revealed in Rorschach percepts, phenomena directly related to the differential diagnosis of level of personality structure and organization (Acklin, 1992, 1993, 1994; Kernberg, 1976).

Object relations approaches to Rorschach test interpretation have come to predominate in both clinical practice and research (Frank, 1995b; Stricker & Healey, 1990) with a large, developing empirical literature. Sidney Blatt and colleagues (Blatt, Brenneis, Schimick, & Glick, 1976a, 1976b; Blatt & Lerner, 1983; Blatt, Wild, & Ritzler, 1975) developed a Rorschach Concept of the Object Scale that uses structural-developmental theory as a means to assess the features of Rorschach responses. Their investigations have demonstrated solid empirical associations between features of internalized object representations and differing types of psychopathology, including borderline personality organization. The Mutuality of Autonomy Scale (MOAS; Urist, 1977, 1980; Urist & Schill, 1982) characterizes the structural and interactional features of object representations. Harder, Greenwald, Wechsler, and Ritzler (1984) found the MOAS to be useful as an indicator of psychopathology. Rorschach data on object representations also has been found very useful in the diagnosis of antisocial personality disorder and underlying personality organization (Gacono, 1990; Gacono & Meloy, 1992; Gacono, Meloy, & Berg, 1992).

Self psychological approaches to the Rorschach assessment situation and interpretation emerged in 1988 (Arnow & Cooper, 1988). Following the work of Kohut, Rorschach responses are viewed as a reflection of the state of the self (a self-representation), as a perception of an archaic self-object, and as an indication of how new objects will be experienced (p. 56). More recently, self psychological approaches to the Rorschach have been described by Silverstein (1999), who assessed mirroring, idealization, and twinship in Rorschach content.

Asserting that the Rorschach test is unparalleled in graphically assessing and displaying underlying structural, affective, and representational features of the test-taker's inner world, Acklin (1992, 1993, 1994) advocated integrating structural, theoretically derived, and thematic approaches, focusing on Kernberg's psychostructural diagnosis of personality organiza-

tion. Acklin wrote that psychoanalytic research on boundary disturbance, structural integrity of object representations, assessment of drive-laden content, and use of structure in the assessment situation, in combination with Comprehensive System variables such as Special Scores, Weighted Sum 6, and the Schizophrenia Index (and the more recent Perceptual-Thinking Index) assist in the differential diagnosis of psychotic level of personality organization (Exner, 2002; Kleiger, 1999; Weiner, 2003).

Concerning the differential diagnosis of psychotic personality organization, Acklin (1992) wrote:

The psychodiagnostician examining an individual with suspected psychotic personality organization might expect to find the following Rorschach characteristics: loading up of Special Scores, especially Level 2 special scores; a heavily Weighted Sum 6; Schizophrenia Index at a 4 or 5; disturbances and oddities of syntax and representation indicative of thought disorder; deterioration of Form Level; disturbances in the structural features of percepts, especially human percepts, failure of defensive operations and utilization of primitive defenses, expression of raw, drive-laden, primary process material, and themes of barrenness, emptiness, and malevolent interaction. (p. 460)

Concerning the differential diagnosis of borderline personality organization, Acklin (1993) wrote:

Adequate functioning on high structure tests and deteriorated performance on projectives, especially the Rorschach, evidence of loosened thinking, boundary disturbance and thought disorder, malevolent object relations, dysphoria, poor stress tolerance, and labile emotionality. (p. 335)

Finally, concerning neurotic level of personality organizations, Acklin (1994) wrote:

In terms of nomothetic data derived from the Comprehensive System, guided by a conceptual approach, one might expect the neurotic record to be characterized by banality (high Populars, high Intellectualization Index), without elevation of validity indicators (Lambda), affective overcontrol (reflected in predominance of FC responses in the Color Balance), generally adequate reality testing (X+% and F+%) and immaturity (predominance of FM over M, Human movement associated with animal content and Color Projection). (p. 7)

The Rorschach test is particularly useful in the differential diagnosis of borderline level of personality organization, integrating structural and theoretically derived indices assessing boundary disturbance, malevolence and maturity of object relations, defensive operations, affect man-

agement, and narcissism (Acklin, 1995). Borderline personality disorder and organization received considerable attention from Rorschach psychologists in the 1980s and 1990s, using both "sign" approaches (Exner, 1986; Gartner, Hurt, & Gartner, 1989) and theoretically derived scales (Acklin, 1995; Berg, 1990; Blais, Hilsenroth, Fowler, & Conboy, 1999; Cooper, Perry, & Arnow, 1988; Cooper, Perry, & O'Connell, 1991; Gacono et al., 1992; Hilsenroth et al., 1993; Johnston & Holzman, 1979; Lerner, 1990; O'Connell, Cooper, Perry, & Hoke, 1989; Perry & Cooper, 1989; Stuart et al., 1990). In general, there has been considerable empirical support for the borderline personality diagnosis within the context of the DSM framework and the theories of Gunderson (1984) and Kernberg (1976), who described borderline personality organization.

In combination with other sources of information, Rorschach test data have particular value in accessing experience-near images that reflect the subject's characteristic modes of experiencing and repertoire of ego states during the assessment process. The test-taking situation is a "real time" experience of immersion in the blots, eliciting and illuminating the individual's characteristic manner of dealing with a novel situation. In other words, the test subject's personality (i.e., characteristic manner of responding to and coping with experience) becomes manifest in the test situation.

Schachtel's (1966) Rorschach classic *Experiential Foundations of Rorschach's Test* focused on the experiential dimension of the assessment task. He wrote:

I call the main approach I use ... "experiential" because it consists mostly in the attempt to reconstruct, to understand, and to make more explicit the experiences that the testee underwent in taking the test and his reaction to these experiences, specifically his way of approaching or avoiding and of handling the experience of the inkblots in the context of the test task. (p. 183)

Schachtel (1966), perhaps better than any other Rorschach commentator, described the profundity of Rorschach test data:

The primary data elicited by Rorschach's test are not concepts but percepts... The data we study in Rorschach's test are what the testee saw in the blots and how he saw it, in the full concreteness of the percepts and with all the emotional overtones and undercurrents that color what he saw, and all the intellectual and emotional effort, its quality, its process, its smoothness, or conflicts which entered into the work of perceiving, associating, and judging the fitness of the percept. From his words, we try to reconstruct his experience. The score is merely an abstraction of this experience. (p. 261)

Schachtel added that "the visual impressions of the inkblots, openly received, will touch upon memories and sensibilities which resonate in the

associations to the inkblot" (p. 45). Furthermore, one's "encounter" with the inkblots in the test situation

ranges all the way from a full encounter with the inkblots in which the whole personality with all its layers is engaged on a wide range of levels of functioning, resulting in considerable variety and flexibility of experiences and responses, to an almost complete avoidance of the encounter by rejection of the test task or, more frequently, by the mobilization of massive defenses against all but the most superficial, stereotyped, and rigidly controlled responses. (p. 44)

Consistent with the view that Rorschach percepts reflect internal and idiographic imagery, Schafer (1954) viewed the test as accessing ego strivings in their imaginal language. Comparing Rorschach responses with dream and daydream images, he noted that the test "often briefly unlocks the book of our private imagery" (p. 75).

In contrast to other psychological test data—typically quantitative and nomothetic in nature—Rorschach percepts are the raw material of mentation and the end products of personality at work, yielding a sample of visual representations that reflect the individual's inner experience (Lerner, 1992, 1998; Schachtel, 1966). Although caution is advised in the use of individual responses for interpretation, the content of individual responses may be especially revealing, demonstrating a sample of private imagery: the repertoire of ego states that characterize the individual's inner life.

In nomothetic-idiographic methodology of personality assessment and diagnosis, Rorschach content contributes to an understanding of individual psychodynamics (Aronow & Reznikoff, 1976) including self-concept, attitudes toward significant others, perceptions of the environment, major concerns, and internal conflicts. In combination with empirically derived structural data (including observations of the work producing the response) individual responses, in their raw form, provide graphic representation of subjective experience and how people perceive themselves, others, and their world.

Assessment and diagnosis of personality disorder occurs in the context and methodology of comprehensive psychological assessment. The psychodiagnostician relies on multiple sources and methods, recognizing their independence, incompleteness, and inherent limitations. In contrast to other sources of psychological data, the Rorschach test makes a unique contribution in the systematic psychological assessment and diagnosis of personality functioning, taking its place as a heteromethod assessment approach in which independent source data—interviews, self-report personality inventories and checklists, and observer-informant assessment—are integrated via a disciplined and idiographic methodology. No

individual source of information appears to be capable of standing alone in the assessment task. Integrating multiple data sources strengthens the network of interpretive hypotheses. Unlike other measures, the Rorschach test provides both nomothetic and idiographic information. The test's unique and critical position in the psychological assessment task, however, and its staying power as a frequently used clinical assessment tool reside in its ability to tap and express the primordial images and language of the individual's inner life.

REFERENCES

- Acklin, M. W. (1992). Psychodiagnosis of personality structure: Psychotic personality organization. *Journal of Personality Assessment*, 58, 454-463.
- Acklin, M. W. (1993). Psychodiagnosis of personality structure II: Borderline personality organization. *Journal of Personality Assessment*, 61, 329-341.
- Acklin, M. W. (1994). Psychodiagnosis of personality structure: Neurotic personality organization. *Journal of Personality Assessment*, 63, 1-9.
- Acklin, M. W. (1995). Integrative Rorschach interpretation. *Journal of Personality Assessment*, 64, 235-238.
- Acklin, M. W. (1999). Behavioral science foundations of the Rorschach Test. *Assessment*, 6, 319-326.
- Acklin, M. W. (2002). How to select personality tests for a test battery. In J. N. Butcher (Ed.), *Clinical personality assessment: Practical approaches* (2nd ed.). London: Oxford University Press.
- Acklin, M., & Oliveira-Berry, J. (1996). Return to the source: Rorschach's psychodiagnostics. *Journal of Personality Assessment*, 67(2), 427-433.
- American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders* (4th ed., text revision). Washington, DC: APA Press.
- Arlow, J. (1985). The concept of psychic reality and related problems. *Journal of the American Psychoanalytic Association*, 33, 521-535.
- Arnou, D., & Cooper, S. (1988). Rorschach psychology of the self. In H. D. Lerner & P. M. Lerner (Eds.), *Primitive mental states and the Rorschach* (pp. 53-68). New York: International Universities Press.
- Aronow, E., & Reznikoff, M. (1976). *Rorschach content interpretation*. New York: Grune & Stratton.
- Atwood, G. E., & Stolorow, R. D. (1980). Psychoanalytic concepts and the representational world. *Psychoanalysis and Contemporary Thought*, 3, 267-290.
- Atwood, G. E., & Stolorow, R. D. (1984). *Structures of subjectivity: Explorations of psychoanalytic phenomenology*. Hillsdale, NJ: Analytic Press.
- Berg, J. (1990). Differentiating ego functions of borderline and narcissistic personality. *Journal of Personality Assessment*, 55, 537-548.
- Blais, M. A., & Hilsenroth, M. J. (1998). Rorschach correlates of the DSM-IV histrionic personality disorder. *Journal of Personality Assessment*, 70, 355-364.
- Blais, M. A., Hilsenroth, M. J., Castlebury, F., Fowler, J. C., & Baity, M. R. (2001). Predicting DSM-IV cluster B personality disorder criteria from MMPI-2 and Ror-

- schach data: A test of incremental validity. *Journal of Personality Assessment*, 76, 150-168.
- Blais, M. A., Hilsenroth, M. J., & Fowler, J. C. (1998). Rorschach correlates of the DSM-IV histrionic personality disorder. *Journal of Personality Assessment*, 70(2), 355-364.
- Blais, M. A., Hilsenroth, M. J., Fowler, J. C., & Conboy, C. A. (1999). A Rorschach exploration of the DSM-IV borderline personality disorder. *Journal of Clinical Psychology*, 55, 563-572.
- Blanck, G., & Blanck, R. (1975). *Ego psychology: Theory and practice*. New York: Columbia University Press.
- Blatt, S. (1995). Representational structures in psychopathology. In D. Cicchetti & S. L. Toth, (Eds.), *Rochester Symposium on Developmental Psychopathology: Volume I. Emotion, cognition, and representation* (pp. 1-33). Rochester, NY: University of Rochester Press.
- Blatt, S., Bers, S. A. (1993). The sense of self in depression: A psychodynamic perspective. In Z. Segal & S. Blatt (Eds.), *The self in emotional distress: Cognitive and psychodynamic perspectives* (pp. 171-217.). New York: Guilford.
- Blatt, S. J., Brenneis, C. B., Shimick, J., & Glick, M. (1976a). *A developmental analysis of the concept of the object on the Rorschach*. Unpublished research manual, Yale University, New Haven, CT.
- Blatt, S. J., Brenneis, C. B., Shimick, J., & Glick, M. (1976b). Normal development and psychopathological impairment of the concept of the object on the Rorschach. *Journal of Abnormal Psychology*, 85, 264-373.
- Blatt, S. J., & Lerner, H. (1983). The psychological assessment of object representation. *Journal of Personality Assessment*, 47, 7-28.
- Blatt, S. J., Wild, C. M., & Ritzler, B. A. (1975). Disturbances of object representations in schizophrenia. *Psychoanalysis and Contemporary Science*, 4, 235-288.
- Campbell, D. T., & Fiske, D. W. (1959). Convergent and discriminant validation by the multitrait multimethod matrix. *Psychological Bulletin*, 56, 81-105.
- Carlson, E. A., & Sroufe, L. A. (1995). Contribution of attachment theory to developmental psychopathology. In D. Cicchetti & D. J. Cohen (Eds.), *Developmental psychopathology: Volume I. Theory and Methods* (pp. 581-617). New York: John Wiley.
- Colligan, R. C., Morey, L. C., & Offord, K. P. (1994). The MMPI/MMPI-2 Personality Disorder Scales: Contemporary norms for adults and adolescents. *Journal of Clinical Psychology*, 2, 168-200.
- Cook, T. D., & Campbell, D. T. (1979). *Quasi-experimental design: Design and analysis issues for field settings*. Boston: Houghton-Mifflin.
- Cooper, S. Perry, J., & Arnou, D. (1988). An empirical approach to the study of defense mechanisms: I. Reliability and preliminary validity of the Rorschach Defense scales. *Journal of Personality Assessment*, 52, 187-203.
- Cooper, S., Perry, J., & O'Connell, M. (1991). The Rorschach Defense Scales: II. Longitudinal perspectives. *Journal of Personality Assessment*, 56, 191-201.
- Epstein, S. (1994). Integration of the cognitive and psychodynamic unconscious. *American Psychologist*, 49, 709-724.
- Exner, J. (1986). Some Rorschach data comparing schizophrenics with borderline and schizotypal disorders. *Journal of Personality Assessment*, 50, 455-471.

- Exner, J. E. (2002). *The Rorschach: Basis foundations and principles of interpretation* (4th ed.). New York: John Wiley.
- Exner, J. E. (2003). *The Rorschach: A comprehensive system* (4th ed.). New York: John Wiley.
- Federn, P. (1952). *Ego psychology and the psychoses*. New York: Basic Books.
- Frank, G. (1994). On the assessment of thought disorder from the Rorschach. *Psychological Reports, 75*, 375–383.
- Frank, G. (1995a). An ego-psychological approach to the Rorschach. *Psychological Reports, 77*, 911–930.
- Frank, G. (1995b). On the assessment of self- and object representations for the Rorschach: A review of the research and commentary. *Psychological Reports, 76*, 659–671.
- Frank, L. (1939). Projective methods for the study of personality. *Journal of Psychology, 8*, 399–413.
- Freud, S. (1961). The ego and the id. In J. Strachey (Ed.), *The standard edition of the complete psychological works of Sigmund Freud* (Vol. 19). London: Hogarth.
- Freud, S. (1940/1961). An outline of psychoanalysis. In J. Strachey (Ed.), *The standard edition of the complete psychological works of Sigmund Freud* (pp. 2–78). London: Hogarth.
- Gacono, C. B. (1990). An empirical study of object relations and defensive operations in antisocial personality disorder. *Journal of Personality Assessment, 54*, 589–600.
- Gacono, C. B., & Meloy, J. R. (1992). The Rorschach and the DSM-III-R antisocial personality. *Journal of Clinical Psychology, 48*, 393–406.
- Gacono, C. B., Meloy, J. R., & Berg, J. L. (1992). Object relations, defensive operations, and affective states in narcissistic, borderline, and antisocial personality disorder. *Journal of Personality Assessment, 59*, 32–49.
- Garb, H. N. (1994a). Judgment research: Implications for clinical practice and testimony in court. *Applied and Preventive Psychology, 3*, 173–183.
- Garb, H. N. (1994b). Cognitive heuristics and biases in personality assessment. In L. Heath, R. S. Tindale, J. Edwards, E. Posavac, F. Bryant, E. Henderson-King, et al. (Eds.), *Applications of heuristics and biases to social issues: Social psychological applications to social issues* (Vol. 3). New York: Plenum Press.
- Garb, H. N. (1996). The representativeness and past-behavior heuristics in clinical judgment. *Professional Psychology: Research and Practice, 27*, 272–277.
- Garb, H. N. (1998). *Studying the clinician: Judgment research and psychological assessment*. Washington, DC: American Psychological Association.
- Garb, H., Wood, J., Lilienfeld, S., Scott, O., & Nezworski, T. (2002). Effective use of projective techniques in clinical practice: Let the data help with selection and interpretation. *Professional Psychology: Research and Practice, 33*, 454–463.
- Gartner, J., Hurt, S., & Gartner, A. (1989). Psychological test signs of borderline personality disorder: A review of the empirical literature. *Journal of Personality Assessment, 53*, 423–441.
- Greenwald, A. (1992). New Look 3: Unconscious cognition reclaimed. *American Psychologist, 47*, 766–779.
- Gunderson, J. (1984). *Borderline personality disorder*. Washington, DC: American Psychiatric Press.
- Harder, D., Greenwald, D., Wechsler, S., & Ritzler, B. (1984). The Urist Mutuality of Autonomy Scale as an indicator of psychopathology. *Journal of Clinical Psychology, 40*, 1078–1083.

- Hilsenroth, M., Hibbard, S., Nash, M., & Handler, L. (1993). A Rorschach study of narcissism, defense, and aggression in borderline, narcissistic, and cluster C personality disorders. *Journal of Personality Assessment*, *60*, 346-361.
- Holt, R. R. (1970). *Manual for the scoring of primary process manifestations in Rorschach responses* (10th draft). Research Center for Mental Health: New York University, New York.
- Holt, R. R., & Havel, J. (1960). A method for assessing primary and secondary process in the Rorschach. In M. Rickers-Ovsiankina (Ed.), *Rorschach Psychology* (pp. 263-315). New York: John Wiley.
- Horowitz, M. J. (1983). *Image formation and psychotherapy*. New York: Jason Aronson.
- Horowitz, M. J. (1988). *Introduction to psychodynamics: A new synthesis*. New York: Basic Books.
- Horowitz, M. J. (1998). *Cognitive psychodynamics: From conflict to character*. New York: John Wiley.
- Horowitz, M. J. (1991). *Person schemas and maladaptive interpersonal patterns*. Chicago: The University of Chicago Press.
- Jacobi, J. (1999). *Complex, archetype, and symbol in the psychology of C. G. Jung*. London: Routledge.
- Johnston, M. H., & Holzman, P. S. (1979). *Assessing schizophrenic thinking*. San Francisco, CA: Jossey-Bass.
- Josephs, L. (1989). The cleaning lady: The fate of an archaic maternal imago. *Psychoanalysis and Psychotherapy*, *7*, 116-128.
- Joseph, S. L. (1992). *Character structure and the organization of the self*. New York: Columbia University Press.
- Kernberg, O. (1976). *Object relations theory and clinical psychoanalysis*. New York: Jason Aronson.
- Kernberg, O. F. (1984). *Severe personality disorders: Psychotherapeutic strategies*. New Haven: Yale University Press.
- Kleiger, J. (1999). *Disordered thinking and the Rorschach: Theory, research, and differential diagnosis*. Hillsdale, NJ: The Analytic Press.
- Lakoff, G., & Johnson, M. (1999). *Philosophy in the flesh: The embodied mind and its challenge to Western thought*. New York: Basic Books.
- Lerner, P. (1990). Rorschach assessment of primitive defenses: A review. *Journal of Personality Assessment*, *54*, 30-46.
- Lerner, P. (1991). *Psychoanalytic theory and the Rorschach*. Hillsdale, NJ: The Analytic Press.
- Lerner, P. (1992). Toward an experiential psychoanalytic approach to the Rorschach. *Bulletin of the Menninger Clinic*, *56*, 451-464.
- Lerner, P. (1998). Schachtel and experiential Rorschach assessment. *Journal of Personality Assessment*, *71*, 182-188.
- Lilienfeld, S., Wood, J., & Garb, H. (2000). The scientific status of projective techniques. *Psychological Science in the Public Interest*, *1*, 27-66.
- McClelland, D. (1980). Motive dispositions: The merits of operant and respondent measures. In L. Wheeler (Eds.), *Review of Personality and Social Psychology* (Vol. 1, pp. 10-41). Beverly Hills, CA: Sage.
- McWilliams, N. (1994). *Psychoanalytic diagnosis: Understanding personality structure in the clinical process*. New York: Guilford.

- Meloy, R., Acklin, M. W., Gacono, C., Murray, J., & Peterson, C.A. (1997). *Contemporary Rorschach interpretation*. Mahwah, NJ: Lawrence Erlbaum Associates.
- Meyer, G. (2000). On the science of Rorschach assessment. *Journal of Personality Assessment*, 75, 46–81.
- Meyer, G., Finn, S., Eyde, L. D., Kay, G., Moreland, K., Dies, R. R., et al. (2001). Psychological testing and psychological assessment: A review of evidence and issues. *American Psychologist*, 56, 128–165.
- Meyer, G. J. (2002). Implications of information gathering methods for a refined taxonomy of psychopathology. In L. E. Beutler & M. Malik (Eds.), *Rethinking DSM: A psychological perspective* (pp. 69–105). Washington, DC: APA Press.
- Millon, T. (1969). *Modern psychopathology: A biosocial approach to maladaptive learning and functioning*. Prospect Heights, IL: Waveland Press.
- Millon, T. (1981). *Disorders of personality DSM-III: Axis II*. New York: John Wiley.
- Mitchell, S. A. (1988). *Relational concepts in psychoanalysis: An integration*. Cambridge, MA: Harvard University Press.
- Moore, B. E., & Fine, B. D. (1968). *A glossary of psychoanalytic terms and concepts* (2nd ed.). New York: American Psychoanalytic Association.
- Morey, L. C., Waugh, M. H., & Blashfield, R. K. (1985). MMPI scales for DSM-III personality disorders: Their derivation and correlates. *Journal of Personality Assessment*, 49(3), 245–251.
- O'Connell, M., Cooper, S., Perry, J., & Hoke, L. (1989). The relationship between thought disorder and psychotic symptoms in borderline personality disorder. *Journal of Nervous and Mental Disease*, 177, 273–278.
- Perry, J., & Cooper, S. (1989). An empirical study of defense mechanisms: I. Clinical interview and life vignette ratings. *Archives of General Psychiatry*, 46, 444–452.
- Pine, F. (1988). The four psychologies of psychoanalysis and their place in clinical work. *Journal of the American Psychoanalytic Association*, 36, 571–596.
- Pine, F. (1990). *Drive, ego, object, and self: A synthesis for clinical work*. New York: Basic Books.
- Rapaport, D., Gill, M., & Schafer, R. (1968). *Diagnostic psychological testing*. New York: International Universities Press.
- Reichenbach, H. (1938). *Experience and prediction*. Chicago: University of Chicago Press.
- Rosner, S. (1990). Pine's four psychologies of psychoanalysis and the Rorschach. *Psychoanalysis and Psychotherapy*, 8, 103–111.
- Rubens, R. L. (1994). Fairbairn's structural theory. In J. S. Grotstein & D. B. Rinsley (Eds.), *Fairbairn and the origins of object relations* (pp. 151–173). Oxford, England: Free Association Books.
- Sandler, J. S., & Rosenblatt, B. R. (1962). The concept of the representational world. *Psychoanalytic Study of the Child*, 17, 128–145.
- Schachtel, E. (1966). *Experiential foundations of Rorschach's test*. Hillsdale, NJ: The Analytic Press.
- Schafer, R. (1954). *Psychoanalytic interpretation in Rorschach testing: Theory and application*. New York: Grune & Stratton.
- Shakow, D. (1976). What is clinical psychology? *American Psychologist*, 31, 553–560.
- Shapiro, D. (1965). *Neurotic styles*. New York: Basic Books.
- Silverstein, M. (1999). *Self psychology and diagnostic assessment: Identifying selfobject functions through psychological testing*. Mahwah, NJ: Lawrence Erlbaum Associates.

- Stolorow, R., & Atwood, G. (1989). The unconscious and unconscious fantasy: An intersubjective-developmental perspective. *Psychoanalytic Inquiry, 9*, 364-374.
- Stricker, G., & Gold, J. R. (1999). The Rorschach: Toward a nomothetically based, idiographically applicable configurational model. *Psychological Assessment, 11*, 240-250.
- Stricker, G., & Healey, B. J. (1990). Projective assessment of object relations: A review of the empirical literature. *Psychological Assessment: A Journal of Consulting and Clinical Psychology, 2*, 219-230.
- Stricker, G., & Trierweiler, S. (1995). The local clinical scientist: A bridge between science and practice. *American Psychologist, 50*, 995-1002.
- Stuart, J., Western, D., Lohr, N., Benjamin, J., Becker, S., Vorus, N., et al. (1990). Object relations in borderlines, depressives, and normals: An examination of human responses on the Rorschach. *Journal of Personality Assessment, 55*, 296-318.
- Trull, T. J., Widiger, T. A., Usuda, J. D., Holcomb, J., Doan, B., Axlerod, S. R., et al. (1998). A structural interview for the assessment of the Five-Factor Model of personality. *Psychological Assessment, 10*, 229-240.
- Tyson, P., & Tyson, R. (1990). *Psychoanalytic theories of development: An integration*. New Haven: Yale University Press.
- Urist, J. (1977). The Rorschach test and the assessment of object relations. *Journal of Personality Assessment, 41*, 309.
- Urist, J. (1980). Object relations. In R. H. Woody (Ed.), *Encyclopedia of clinical assessment* (Vol. 1, pp. 821-833). San Francisco: Jossey-Bass.
- Urist, J., & Schill, M. (1982). Validity of the Rorschach mutuality of autonomy scale: A replication using excerpted responses. *Journal of Personality Assessment, 46*, 450-454.
- Viglione, D., & Hilsenroth, M. (2001). The Rorschach: Facts, fictions, and future. *Psychological Assessment, 13*, 452-471.
- Weiner, I. B. (2003). *Principles of Rorschach interpretation* (2nd ed.). Mahwah, NJ: Lawrence Erlbaum Associates.
- Wiggins, J. S. (1973). *Personality and prediction*. Reading, MA: Addison-Wesley.