Inkblots Do Not a Test Make!
Edward Aronow and
Marvin Reznikoff
A Rorschach Introduction: Content
and Perceptual Approaches
146 pp. $15.00

Review by
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Approaches to Projective Techniques co-
authored with L. Eron and F. Schumer.

This book is published at a crucial junc-
ture in the history of the Rorschach tech-
nique. After its meteoric rise in popu-
larity during the 1940s and 1950s, the
Rorschach suffered a general decline. As
the old masters of the art died off, they
were replaced not by disciples, but by
critical academicians who found little ev-
idence for its reliability and validity and
consequently dropped its presentation in
their academic courses. They turned in-
stead to a consideration of personality in-
ventories of the Minnesota Multiphasic
Personality Inventory type and other
more objective performance tests as well
as to surveys and applications of psycho-
therapy and behavior modification. But
currently there seems to be a revival of
interest in the Rorschach technique, as
evidenced by attempts of some of the
disciples trained by the early masters to
demonstrate that there is, after all, some
validity to the classic interpretative claims
of some of the early Rorschach propo-
nents. Whether or not this rise in interest
will actually succeed in revitalizing the
Rorschach technique remains to be seen.
The book under review can serve as a
primer to this new approach to the Ror-
schach.

After introducing the directions for
administering the test and describing the
characteristics of the blots, the authors
present the traditional scoring categories,
based heavily on Klopf's approach. The
aim of this section is to simplify the tra-
ditional approach to permit a more direct
analysis. Normative data on children, ad-
olescents, and the elderly, based primarily
on the work of Ames and her col-
leagues, are also presented to help the
clinician distinguish deviant from
expected responses.

The second half of the book presents
usually neglected aspects of content
analysis. The authors stress idiographic
as opposed to monothetic interpretation
of content. A chapter is devoted to di-
rections for content-oriented administra-
tion. I am sympathetic to the idiographic
approach, but wonder whether it might
not be necessary eventually to develop
interactive scaling for the idiographic con-
tent similar to the scaling for the mono-
thetic approach. Thus, the discussion of
the self-concept (p. 74) might readily lead
to interactive scaling over all the responses
dealing with material regarding the self.
Such overall scaling could yield a measure
of reliability, and intensity and might also
reveal contradictions about the self-con-
cept rather than consistency in some in-
dividuals. Furthermore, it would provide
opportunities to assess the relative im-
portance of the self-concept component
compared to other concepts.

The authors then present a special
chapter devoted to content sequence
analysis, extending the standard sequence
analysis for location of the response to
other aspects of the response. Such mat-
ters as repetition of a theme, shift be-
tween wish and defense in interpretation,
and shifts in feelings toward persons are
analyzed in this chapter. Suggestions for
report writing and sample protocols
complete the book.

The book is well written and meets the
goals set by the authors. In considering
its value, one must evaluate contributions
of the Rorschach technique and place the
Rorschach in perspective with regard to
clinical psychology.

The Rorschach as an interview
Aronow and Reznikoff's threat in this
book is that the classic Rorschach tech-
nique qualifies less as a test than as an
interview, which when analyzed for its
content, correlates with the content of
other interviews conducted without the
benefit of inkblots. Though the authors
do not entirely relinquish perceptual
scoring, they differ from other Rorschach
users primarily in their stress on the con-
tent of the responses.

The authors' conceptual framework is
not new. The first suggestion of the need
for scaling of Rorschach content appeared
in a series of reports from the Department
of Research Psychology of the New York
State Psychiatric Institute over forty years
ago (Zubin, 1941; Zubin, Chute, & Ven-
lier, 1943), followed by a large number
of subsequent reports that not only
stressed this point but also questioned the
reliability, validity, and general psy-
chometric status of the Rorschach as an
instrument (Zubin, 1954; 1956; 1978;
Zubin, Eron, & Schumer, 1965). For ex-
ample, I wrote:

...that the Rorschach is an interview and
that its correct evaluation, like the correct eval-
uation of any interview, is dependent upon
its content. If we provide scales for analyz-
ing its content, we shall be on the way to-
wards clarifying many of the present day con-
tradictions and obtain a better perspective
on the evaluation of personality. (Zubin, 1954,
p. 313)

...that the content is the primary issue.
Why has it taken so long to overcome the
biased view that the Rorschach, as used in
the traditional way, really "works"? One would have thought that
the large accumulation of negative Ror-
schach findings would have suppressed
its popularity, as was the case for the
Szondi test. Apparently, the classic Ror-
schach method survives by virtue of the
"grandfather clause".

Has the Rorschach impeded
clinical psychology?
Is it possible that on balance the Ror-
schach has done more harm than good
for the clinical psychologist? It provided the illusion that a good test was available to replace the formerly unreliable free-wheeling interview for diagnosis and personality assessment. The final criterion available for diagnosis and assessment, however, is the interview itself. For this reason some of the more objectively minded clinicians turned away from the Rorschach and applied their energies to the development of structured clinical interviews, which gave rise to such instruments as the Psychiatric Status Schedule, Present State Examination, and the Schedule for Affective Disorders and Schizophrenia, and which eventually led to a formal list of research diagnostic criteria and the development of the Diagnostic and Statistical Manual (DSM-III) in the Biometrics Research Unit at the New York State Psychiatric Institute. In the meantime, the rest of clinical psychology, languishing in the lap of the Rorschach technique, failed to join the movement for improving interviewing techniques—a thrust that was beginning to lay the foundation for modern diagnosis and assessment. Thus, the Rorschach may have been a stumbling block to progress in clinical psychology. The revival of interest in the Rorschach method may lay new stumbling blocks on this path.

Some historical perspectives
There are historical reasons why the clinical psychologist clung to inkbloths. Their mystique created an aura that the psychiatrist could envy, and because interviews and diagnosis, at that time, were preempted by psychiatry, clinical psychologists hid behind the inkbloths for professional protection. In the early days of clinical psychology, the psychologist was limited to the giving of intelligence tests and personality inventories. These were usually tolerated with boredom. A hush fell over the audience, however, when the mysterious Rorschach findings were first presented. Never after that did a psychiatric resident dare give a diagnosis without consulting the Rorschach expert.

How did inkbloths enter psychology? There was general interest in inkbloths as a parlor game at the turn of the century. Hermann Rorschach caught the spirit of the game and began administering it to his patients. He noted that some of his anxious patients tended to report clouds in their responses, and he noted similar correlations between various personality dimensions and other aspects of the responses. He gradually developed the hypothesis that people perceive world space in accordance with their personality characteristics. From this he proceeded to the hypothesis that perception in inkbloth space also reflected personality.

When we learn how world space with its visual gradients and other parameters is perceived and can then fathom the corresponding gradients in inkbloth space, we may be able to put Rorschach’s attractive hypothesis to the test. (Partial attempts at this undertaking have been made in the past, e.g., Klein & Arnheim, 1953; Zubin, 1956; Zubin, Eron, & Schumer, 1965). Until that day arrives, however, it is probably best to treat Rorschach responses as interview material. Its content may actually provide confirmation of, or add material to, information yielded by systematic structured interviews. If the Rorschach is just another interview, however, why bother with it?

Neglect of experimental approaches to validity
It is of some interest that the Rorschach revival seems to ignore some of the more fundamental attempts at validating the Rorschach technique. Thus, attempts to provide specific techniques for testing the validity of the movement response through the Levy Movement Blots and to test the significance of such determinants as color, chiaroscuro, and so forth in specifically targeted “custom-made” instruments (Zubin, Eron, & Schumer, 1965) are hardly remembered. The work of Wayne Holtzman (1961), which added statistical rigor to the results, also seems to be alien to the Rorschach revivalists. Even the most insightful critique of the interpretive value of the Rorschach stemming from the Burghölzli itself, where Hermann Rorschach worked, seems to have been ignored. Uchtenhagen (Bleuler, 1973), who described schizophrenia-like Rorschach responses of normal blood relatives of schizophrenics, noted that the presence of a schizophrenia-like Rorschach protocol does not mean the presence of schizophrenia in the subject. The Rorschach test is not a definitive diagnostic device for the detection of a schizophrenic psychosis. (Translated by David Zubin in Zubin, 1978, p. 182)

Uchtenhagen went on to ask whether the presence of a schizophrenic-like test result means anything at all. He suggested that the schizophrenic-like response is often a response to the tense situation that the test elicits and that occurs in normals as well as in schizophrenics.

Evaluation and diagnosis in clinical psychology may find difficulty developing a scientific base until clinical psychology gives up hiding behind inkbloths and their interpretation and resums direct unmedicated contact with the problems facing the patient through interviewing, observation, and other more direct, experimentally established approaches. In the meantime, if clinical psychologists must continue to apply the Rorschach, the work of Arnow and Reznikoff brings the Rorschach closer to its true essence as an interview and should help in providing the clinician a more salutary approach to the inherent values of the Rorschach.

References

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