

## Fr & rF Responses

1. I think it's possible that high FD (6 in this case) has negative implications, as in possibly excessive self-inspection or self-observation. In this case, the high FD would seem to accentuate the self-focus implied by the high Fr/rF (apparently tending greater than the 3 formally scored).

2. The two determinants probably represent **different types of self-focus**. Perhaps FD is a more overt looking at the self, whereas Fr may suggest another-focused type of self-focus, i.e., looking to others for signs of the self, for **how one is being perceived**. It seems entirely possible that FD has a curvilinear relationship with its correlates, with diminishing increases in self-observation as FD increases. It may even, as you speculate, have a greater bend so that the correlate values decrease as FD becomes very high; I don't think we have any data at all on that. On the other hand, there is a little info that Fr is linearly (or nearly so) related to introversion. In this case the Fr and the FD seem to fit together, and I would be led to think about high disengagement and high introspection as clinical hypotheses, with the low Lambda and high negative D adding to the sense of pressured and uncomfortable introspection, but of course all this subject to disconfirmation on greater acquaintance with the case.

-- Frank

From: "John Wallace" <j-sharon@gbis.com>

To: "Frank Langer" <frank.langer@ALIENS.COM>

Subject: Fw: Re: Interesting case (long post)

Date: 21 March, 2004 12:29

Frank - Your thinking about the Fr is brilliant. It puts the finger directly on the essence of the narcissistic character. "Are you looking at me? Is what you see all right and does what you see agree with what I think I see about myself or should be seeing about myself is all right?"

Thank you for adding to my understanding of this complex riddle of the self-infatuated.

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----- Original Message -----

From: Frank Langer

To: RORSCHACH@MAELSTROM.STJOHNS.EDU

Sent: 21 March, 2004 05:50

Subject: Re: Interesting case (long post)

Gerald,

**The two determinants probably represent different types of self-focus. Perhaps FD is a more overt looking at the self, whereas Fr may suggest another focused type of self-focus, i.e., looking to others for signs of the self, for how one is being perceived.**

-- Frank

----- Original Message -----

**From:** [Gérald Lajoie](mailto:Gerald.Lajoie@maelstrom.stjohns.edu)

**To:** [RORSCHACH@MAELSTROM.STJOHNS.EDU](mailto:RORSCHACH@MAELSTROM.STJOHNS.EDU)

**Sent:** Saturday, March 20, 2004 8:46 AM

**Subject:** Re: Interesting case (long post)

Frank,

I find your interpretations and other members' of the list extremely interesting.

Some of what Frank wrote caught my attention, and I wonder if the following might not relate also to the high number of FD responses (which I would love to read).

«In his case I think the **multiple reflections indicate interpersonal disengagement verging toward avoidance, an underlying concern about the adequacy of the self, a diminution in perceptual accuracy leading to a poor understanding of people, and very possibly an interpersonal bind in which one wants to be simultaneously independent of others and affirmed by them.** »

The (single) standard CS interpretation of FD responses (Joni referred to it in her post) has always appeared doubtful to me (i.e. many have a «distancing» schizoid and/or grandiose flavor). And, after David's question about linearity, I would add this puzzling feature about this determinant and perhaps some other Rorschach variables: one FD may be fine self-inspection (depending on some of its features), but as it increases in number, not only is it not in linear correlation but it even turns around and becomes negative (less and less introspection and more and more disengaging, etc.)

Suddenly I recall that this «statistical» inversion does apply to the D score where +1 is fine but +3 or +4 turns into pathological control.

And Lambda.... and many other variables (one m is positive, several negative, etc).

Thanks

Gérald

From: "Gérald Lajoie" <gerald.lajoie@VIDEOTRON.CA>  
To: <RORSCHACH@MAELSTROM.STJOHNS.EDU>  
Subject: Re: Interesting case (long post)  
Date: 21 March, 2004 09:18

Frank:

«I think it's possible that high FD (6 in this case) has negative implications, as in possibly excessive self-inspection or self-observation.»

Or it may have nothing to do with self-inspection or self-observation.

I even doubt that even a single FD has anything to do with these psychological processes in most cases. I find Exner's data inconclusive at best, and more research would be needed before we go on taking this hypothesis for granted.

Alternative hypotheses include: 1) idealization of powerful figures, 2) struggle against inferiority feelings, 3) fear of dominating figures etc., for instance on Card IV, 4) self-aggrandizement and grandiosity, 5) intellectual distancing, 6) schizoid distancing and avoidance (disengagement or feeling estranged (is this word right) or losing contact) and 7) persecutory feelings, paranoid fear of hidden things, etc.

Gérald

Gerald - Could <<Intellectual Distancing>> also be conceived as <taking a stance spatially over-and-against that which one is observing>? Being capable of placing one's self in extra-personal space in relation to separate objects could be one possible conceptualization. It seems the Fr issue may deal with a person's ability to see themselves interacting with people and objects in spatial perspectives. This would not imply pathology necessarily.

I am curious as to your reaction to these ideas.

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From: "Gérald Lajoie" <gerald.lajoie@videotron.ca>  
To: "John Wallace" <j-sharon@gbis.com>  
Subject: Re:FD (long post)  
Date: 21 March, 2004 15:05

John:

You do make an important distinction, and in a way, it implies a qualitative and/or quantitative difference. Having a good «perspective» on things may signal good insight and good judgment. It would then be different from intellectualization, and rationalization that aim to isolate judgment from any emotional involvement. Some people want to stay «on top of things» in a defensive way: nothing can disturb them.

I also think that **FV** responses may also deal more with anxiety in a subject's «losing touch» with people, and this schizoid feeling might correlate with some suicidal conditions (painful introspection

may be at work in other cases... unless FV responses carry both affects).

My problem with Exner's stance on FD responses is that it sounds rather tautological.

Vol. 1. 3rd ed. p. 510: (After clearly TAKING FOR GRANTED the equation  $FD = \text{self-inspecting}$  on p. 509), Exner mentions 64 patients on a suicide watch showing an average of  $FD > 3$ .

« AT FIRST GLANCE (!), it APPEARED that FD MIGHT be related to depressive features common in the subject (sic) preoccupied with self-destruction. However, the records of psychiatric outpatients also contained significantly more FD responses than the non-patient sample, averaging more than two. Those findings led to the POSTULATE that FD MIGHT relate to introspection, THE LOGIC BEING THAT OUTPATIENTS IN THE THERAPEUTIC ROUTINE ARE ENCOURAGED TO BE SELF-EXAMINING. Subsequently, three studies were completed, the results of which APPEAR to support this postulate.»

The first (unpublished) study finds more FD in introversive subjects... «This finding SUGGESTED that FD is related to delay and/or internalization (no reference given).

The 2nd unpublished study referred to 40 subjects divided into 4 groups than regrouped into two samples of 20, showing that, using an undefined grid (valid ?) applied to verbal material (how reliable ?) those with more FD responses «gave SIGNIFICANTLY more self-directed statements, and SIGNIFICANTLY more statements focusing on the past and present (NO DATA offered).

For those who might think the first subjects were more egocentric (would self-directed statements not be a «good» measure?) the conclusion is a surprise:

«The two groups did not differ on two measures of egocentricity (not identified nor discussed as to validity, etc.), and THUS it SEEMS REASONABLE to conclude that the more self-focusing statements were not SIMPLY a manifestation of self-centeredness. »

A third unpublished study with  $N=15$  involved subjects entering dynamically oriented psychotherapy. The therapists give «subjective ratings of «self-awareness» (?).

After ONE session, there was a significant increase in FD responses.

This achievement should be explained, however, for it did NOT correlate with the therapists' subjective ratings on a 5 point scale. A positive correlation was reached after ten sessions. Great therapists indeed!

«(based on  $r=.37$ ,  $p<.02$ ) These data SEEMED to offer ADDED support to the proposition that FD is related to a psychological activity involving self-inspection, or at least self-awareness. »  
No alternative hypotheses were checked, it seems.

The least one could say about this research design is that it looks extremely naive... and **contradictory**.

Exner goes on: «Data that have ACCUMULATED since 1974 have also provided support (how strong?) for the basic hypothesis concerning FD. » The author then quotes ONE UNPUBLISHED research done by him and students (?) in 1977.

Those interested may read the confusing results on pages 510-511 (with undefined patients, phrases like «slight but not significant decrease...»). Seven treatment modalities were used, some which clearly do not claim to deal with introspection (like systematic desensitization), and yet the total (?) results showed an elevation in FD (and a decrease in FV which had elevated at the start of the treatment). « THUS, it WOULD APPEAR that the [untested for now measure of introspection was used !] introspective process is facilitated by a variety of intervention methods...».

I would not call this science. It do not see any scientific demonstration of the relationship between FD

and self-inspection (sorry, I do not trust therapists' subjective ratings on a 5 point scale!).

We need less parroting and more research, don't we?

Gérald

From: "Frank Langer" <frank.langer@aliens.com>  
To: "John Wallace" <j-sharon@gbis.com>  
Subject: Re: Re: Interesting case (long post)  
Date: 21 March, 2004 17:11

John,

Thanks, but the thing is, reflection givers are not necessarily self-infatuated. Most studies have not found them to have high self-esteem or a self-favorable sense of themselves. More often they have been found to have low self-esteem; that is, reflections are correlated with a negative self-evaluation. This is the opposite of what most of us have been taught -- reflections are supposed to indicate an overvaluation of self-worth -- but I know of only one study (Greenwald, 1990) in support of that point of view and three that have found not just no relationship between reflections and high self-value but significant relationships between reflections (or the Egocentricity Index) and negative self-esteem or the undervaluation of self-worth (Brems & Johnson, 1990; Calkins, 1981; Unger, 1986). Of course I may be wrong about this, so if anyone knows of other studies showing a positive relationship between reflections and self-esteem, self-value, self-worth, self-regard, or self-favorableness -- I'd love to have the reference. Meanwhile, in my own practice, I look for confirmation elsewhere in a patient's history, testing, or third-party info before adding the usual comment about the "overvaluation of self-worth" to my assessment reports on the basis of a reflection in the Rorschach protocol.

Sometimes the attribution of the overvaluation of self-worth is applied even though the presentation is the opposite, and it is then justified on the basis of an alleged narcissistic wound. That is, the patient is shaken, upset, and unhappy, feels lost, whatever, and because there's a reflection in the Rorschach we propose that the actual problem is a recent environmental disconfirmation, that is, the patient's narcissistic sense of entitlement has been breached by failure or disappointment. This can lead to a therapy designed to help the patient develop a measure of humility. But much of the time, reflection givers already have a negative self-evaluation. They are disengaged (there's that negative correlation with Extraversion again) to avoid confirmation of the negative self, not to avoid disconfirmation of the positive (Hargrove, 2000). They don't need help overcoming a sense of pride or entitlement that they don't have. But the psychologist says they have it, and how can they possibly prove they don't? No matter how much patients acknowledge problems, describe themselves in negative terms on self-report instruments, overtly state that they're inadequate and that they're miserable, even that they've made mistakes -- the psychologist can still insist that the real problem is the underlying overvaluation of self worth, and that all their protestations to the contrary are proof.

I think we'll like reflection giving patients more if we think of them not as covertly putting us down to feed their grandiose entitlement but instead as fragile individuals (some of them defensively grandiose) who are overly concerned about their adequacy, about how they are being seen and perceived, and who are doing a kind of dance wherein they try to keep a degree of distance from others or even disengage from others while at the same time are dependent on others for disconfirmation of their self-doubts. So, as in Alan's case, the patient may try to control the examiner, keep him at arm's length but put on an impressive show. They often don't read people well. It reminds me of the spike in the longitudinal data on the frequency of reflections in early adolescence, which would be a great population to study for insight into this variable. That is normal adolescents as well as Dr. Loving's juvenile delinquents, who give reflection giving such a bad name.

-- Frank

----- Original Message -----

From: John Wallace  
To: Frank Langer  
Sent: Sunday, March 21, 2004 3:29 PM  
Subject: Fw: Re: Interesting case (long post)

Frank - Your thinking about the Fr is brilliant. It puts the finger directly on the essence of the narcissistic character. "Are you looking at me? Is what you see alright and does what you see agree with what I think I see or should be seeing as alright?"

Thank you for adding to my understanding of this complex riddle of the self-infatuated.

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Sent: 21 March, 2004 05:50  
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