

> I have seen people who produce a reflection or two (usually those
> apparently more benign nature reflections) who do not show
> obvious signs of narcissism. Could I have missed it? Certainly.
> But I'm left with several questions. 1) What is the difference
> between the individuals for whom the problem is obvious and the
> ones where I miss it? and, more important, 2) Given validity
> coefficients around .4, when is it appropriate to simply dismiss
> the variable as unrelated to the standard interpretive comment?

Rick, with respect to #2, I think the standard or generic interpretive comment should be rejected more often than not in the course of a good assessment. The generic interpretation of a variable is sort of an abstracted and distilled version of a concept that can be applied across people. Yet we're not interested in that nomothetic version of the construct when conducting a clinical assessment. Rather, we want the version of the construct that is shaped and pruned by the idiographic context and other characteristics that are part and parcel of the person we're trying to understand. That is, we want the version of the construct that illustrates the individual in his or her uniqueness.

As this discussion of reflections has revealed, the tailored interpretation that fits for person A may look and feel quite different than the tailored interpretation that fits for person B. While both of the tailored concepts emerge out of the core or abstracted interpretation for Fr, that nomothetic version of the construct has been rejected in favor of an idiographically more accurate version.

Psychometrically, making these sorts of mental refinements is part of what diminishes a validity coefficient. That is, the very process that makes an idiographic judgment more accurate is what makes a nomothetic association weaker. Why? In nomothetic research idiographic context is treated as error variance; the context dependent and unique expression of a score for person A is not shared with person B and C, etc., and thus cannot become an element of the nomothetic association between the score and a criterion.

The article in the American Psychologist by the Psych Assessment Work Group discusses this issue in a bit more detail.

> Doesn't a coefficient of .4 suggest that such errors are likely?
> Yet, for some reason, Rorschachers rarely talk about that. Am I
> missing something?

I agree that we should be tentative about what we think we know from any single variable or any single method of assessment. Life is too complex. And it's worth keeping in mind that a value of $r = .40$ is too high if we're talking about the average validity coefficient for test scales (across all types of tests) or the average potency of

therapeutic interventions. Cohen believed that the average effect size in the behavioral sciences was about $r = .30$. Large surveys of the empirical literature have suggested this is generally correct, though on the generous side, as average effect sizes across various domains of research fall in the range between $r = .20$ to $r = .30$ (Hemphill, 2003, Amer Psych). For instance, Lipsey and Wilson's large scale review of meta-analyses examining the effectiveness of psychological, educational, and behavioral treatment interventions found an average effect size of about $r = .25$.

Greg

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> Rick
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> ----- Original Message -----
> From: "Livingston, James" <j.livingston@PGSP.EDU>
> To: <RORSCHACH@MAELSTROM.STJOHNS.EDU>
> Sent: Saturday, July 12, 2003 10:31 AM
> Subject: we're really talking about Frs now....
>
>
> > Rick
> >
> > I think that some variables' error is more in the false
> negative direction
> > than false positive, and that Fr and V are among those. When
> they are
> > absent, it means little; when they are present, it means a lot.
> Unless, of
> > course, it is incorrectly scored. A lot of folks code it when
> the subject
> > says "mirror image", but does not describe an actual,
> reflective surface.
> >
> > Your point about narcissism being a continuous variable rather
> than discrete
> > is a good one. Presumably Fr's describe a degree that is
> outside of the
> > normal range. Again, I find that Fr's best describe a sense of
> entitlement,
> > and that some kind of inflation drives that entitlement, but it
> certainly is
> > not necessarily describing an inflated, narcissistic
> personality.
> >
> > Is that inconsistent with your experience?
> >
> > Jay

> >
> > James Livingston, Ph.D.
> > Pacific Graduate School of Psychology
> > Palo Alto, CA
> >
> > -----Original Message-----
> > From: Rick Pollack [mailto:rpoll@IX.NETCOM.COM]
> > Sent: Sat 7/12/2003 1:02 AM
> > To: RORSCHACH@MAELSTROM.STJOHNS.EDU
> > Cc:
> > Subject: Re: to Jay: we're really talking about Frs now....
> >
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> >
> > Pam,
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> > I've also seen cases where some of the traditional variable
> > interpretations didn't seem to apply. When do we dismiss them
> > as
> > reflecting the error rate suggested by a correlation
> > coefficient
> > of .4? It seems to me that such errors must exist, yet it seems
> > that Rorschachers rarely entertain the hypothesis that a
> > particular variable simply might not mean what it's supposed to
> > for a given patient.
> >
> > One of the positive things about this thread is that it
> > demonstrates the broad range of thinking about what one
> > variable,
> > Fr, might mean. I think that in some cases its meaning is
> > simply
> > not available to us.
> >
> > One interesting thing about Exner's data is that high lambda
> > non
> > patients produce Fr twice as frequently. One possibility: for
> > some it reflects another kind of avoidance of the task.
> >
> > I'm a bit skeptical about anecdotal reports that Fr people are
> > often narcissistic. Isn't there some narcissism in all of us?
> > How
> > do we distinguish "normal" personality from narcissism based on
> > such reports?
> >
> > Rick
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