

+References for Malingering on the Rorschach

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From: David Hartman

To: Neuropsychology

Sent: 22 December, 2007 14:48

Subject: Re: [npsych] Can the Rorschach be used to detect malingering
(was WMT etc)

I would be very skeptical that individuals claiming other bases of disability, e.g., PTSD could have their Rorschach's used for differential diagnosis.

I tend to agree that clinically, many individuals have difficulty keeping up a malingered pattern throughout a full day of testing, as Steve R. suggests, but I think that a reasonably intelligence psychopathic individual could make themselves look quite disturbed on the Rorschach in the interest of faking a psychiatric disability and the clinician would be clueless.

In my own review of this literature, I've found only a single study by Wasyliv and Ganellen et al (below) which claimed to be successful at distinguishing malingerers as a group from non-malingeringers, when the MMPI was included. I know of no study that shows an individual clinician could take a single RIT protocol and with reasonable accuracy distinguish it as a real versus faked profile.

David Hartman

1: J Pers Assess. 1996 Feb; 66(1):65-80 Can psychosis be maledgered on the Rorschach? An empirical study. Ganellen R J, Wasyliv O E, Haywood T W, Grossman L S.

Can psychosis be faked on the Rorschach? We examined this question by comparing 2 groups of subjects with a high incentive to malinger, persons accused of serious crimes. All subjects were administered both the Minnesota Multiphasic Personality Inventory (MMPI) and the Rorschach and were assigned to honest (N = 35) and maledgered (N = 13) groups on the basis of MMPI validity scales. The Rorschach protocols of these 2 groups were compared to assess how successfully malingerers could deliberately produce records that appeared psychotic on empirically derived Rorschach indices of psychosis. Despite an attempt to portray themselves as psychotic on the MMPI, subjects in the

malingered group did not differ from honest responders on Rorschach variables that distinguish psychotic from non-psychotic patients, but did differ in the number of **dramatic responses** produced. Our data suggest that the combination of the MMPI and Rorschach provides a powerful psychometric technique for detecting deliberate malingering of psychosis.

1: J Pers Assess. 1994 Feb; 62(1):45-57. An empirical study of malingering schizophrenia on the Rorschach. Netter B E, Viglione D J Jr.

California School of Professional Psychology, San Diego 92121.

We investigated whether it is possible to fake schizophrenia on the Rorschach test. We also developed and attempted to validate variables (modified responses) that might distinguish malingerers from true schizophrenics. Forty non-schizophrenic, non-patient subjects, randomly assigned to either a control or malingering condition, and 20 schizophrenic subjects were administered the Rorschach. Dependent variables included indices associated with schizophrenia and modified responses.

As expected, some malingering subjects did successfully fake schizophrenia. Modified responses did help to distinguish groups but were not completely successful. Post hoc analyses of differences were also presented. We concluded (a) that some malingerers, given some information about schizophrenia, might successfully fake schizophrenia and (b) that the modified responses show promise in assisting detection of malingering.

J Pers Assess. 1994 Apr; 62(2):280-98. The susceptibility of the Rorschach Inkblot Test to malingering of combat-related PTSD. Frueh BC, Kinder BN.

Ralph H. Johnson Veterans Affairs Medical Center, Charleston, SC 29401-5799.

The ability of subjects to alter their responses on the Rorschach and self-report measures to fake the symptoms of combat-related Posttraumatic Stress Disorder (PTSD) was investigated. Subjects were 40 White male undergraduates, randomly assigned to either a control or role-informed malingerer group, and 20 White Vietnam veterans with PTSD. Subjects were administered the Rorschach, MMPI-2 validity scales, and Mississippi Scale for Combat-Related PTSD. Results indicated that malingerers were able to achieve scores similar to the PTSD patients on the Mississippi Scale and some Rorschach variables. However, they evidenced significant differences on the MMPI-2 validity scales and several important Rorschach variables. Malingerer typically gave responses that were

overly dramatic and less complicated, less emotionally restrained, and indicated an exaggerated sense of impaired reality testing as compared to PTSD patients. Behavioral differences were also noted between the groups. Findings are discussed in the context of the study's limitations and the practical detection of malingered PTSD in clinical settings.