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## SOCIETY FOR PERSONALITY ASSESSMENT

The Status of the Rorschach in Clinical and Forensic Practice: An Official Statement by the Board of Trustees of the Society for Personality Assessment

This statement is intended for psychologists, other mental health professionals, educators, attorneys, judges, and administrators. Its purpose is to present a summary of the issues and evidence concerning the Rorschach. This statement affirms that the Rorschach possesses reliability and validity similar to that of other generally accepted personality assessment instruments, and its responsible use in personality assessment is appropriate and justified.

## STATEMENT OF THE ISSUE

We are concerned that the Rorschach controversy of the past several years<sup>1</sup> has placed clinical and forensic psychologists in a conflicted position, where they have questioned whether they can continue to use the Rorschach in practice. Of even greater concern, some authors have called for a ban or moratorium on the use of the Rorschach and have recommended that psychology departments and organizations discontinue Rorschach training and practice.<sup>2</sup> As a positive development, the current controversy has led to an intense examination of the instrument, which has resulted in more systematic and well-designed research. Given the findings of psychometric adequacy and clinical utility that have emerged from these extensive investigations,<sup>3</sup> the Board of Trustees of the Society for Personality Assessment submits the following as our official statement on the status of the Rorschach in clinical and forensic practice. To support our position, we have assembled for the members of the Society of Personality Assessment and other interested psychologists and professionals the endnotes and tables in this statement covering the scientific status of the Rorschach.

## HISTORY OF THE RECENT CONTROVERSY

The current controversy questioning the utility of the Rorschach extends back to 1995.<sup>4</sup> Since that time, it has been the topic of special sections in all three of the major journals devoted to the science and practice of psychological assess

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ment.<sup>5</sup> Furthermore, multi-article sections have been published in several specialty journals<sup>6</sup> and a substantial number of stand-alone articles on the topic have attempted to address legitimate criticisms of the Rorschach,<sup>7</sup> while redressing those that are erroneous and misguided. In the process, the Rorschach has recently received a more intensive level of scrutiny than that given any other personality test of which we are aware.

## SUMMARY OF SCIENTIFIC EVIDENCE

Ultimately, examination of the scientific evidence with this degree of rigor should allow an informed conclusion about the Rorschach's status in relation to other personality instruments and its appropriateness for clinical and forensic use. With the publication of the two installments of the special series in *Psychological Assessment*,<sup>8</sup> we think that such a conclusion becomes possible. Furthermore, an important empirical review served to place psychological assessment validity in context relative to other measures used throughout the health sciences.<sup>9</sup> That article presented the findings of over 125 meta-analysis and 800 multi-method assessment studies. The authors' most general conclusion was that psychological assessment instruments perform as effectively as measures in a variety of other health services areas, such as electrocardiograms, mammography, and magnetic resonance imaging.

(MRI), dental radiographs, Papanicolaou (Pap) smears, positron emission tomography (PET) scans, and serum cholesterol level testing.<sup>10</sup> To illustrate, we have included Table 2 from this article (see the Appendix, pp.

224-231), which provides 144 validity coefficients for psychological and medical tests.

Another article,<sup>11</sup> written by authors with opposing views on the Rorschach, moved to a level of specificity that, we believe, allows a clear response to questions about the Rorschach's clinical and forensic utility within the overall context of psychological assessment instruments. We include Tables 2, 3, and 4 from this article (see the Appendix, pp. 232-234), which provides extensive meta-analytic data comparing the validity of the Rorschach to the validity of intelligence scales and the Minnesota Multiphasic Personality Inventory (MMPI) or its revision (MMPI-2).<sup>12</sup> Summarizing these findings, the authors' conclusion is explicit about the Rorschach's validity: there is no reason for the Rorschach to be singled out for particular criticism or specific praise. It produces reasonable validity, roughly on par with other commonly used tests.<sup>13</sup>

This article goes on to state that scientific validity is always conditional; that is, questions of validity for any test can only be addressed in the context of specific uses.

As such, the Rorschach is like other tests for which research supports their general validity—all have purposes for which they are more or less valid.<sup>14</sup> It should be emphasized that this limitation presents an ongoing challenge for all psychological and medical assessment instruments, and a refined understanding of conditional validity is an important direction for ongoing research.

Overall, meta-analytic reviews and individual studies show the Rorschach possesses adequate psychometric properties. The research literature consistently demonstrates that the Rorschach can be scored reliably, has scores that measure important psychological functions, and has scores that provide unique information that cannot be obtained from other relevant instruments or clinical interviews. The extent to which a test provides unique information concerns incremental validity, which is an understudied topic in psychological and medical assessment in general.<sup>15</sup> However, Rorschach incremental validity has been documented in recent studies<sup>16</sup> and in a structured review of the literature.<sup>17</sup> A summary table from this structured review is provided in the Appendix (on p. 235).

#### INDEPENDENT BLUE-RIBBON PANEL EXAMINING MMPI-2 AND RORSCHACH VALIDITY

One challenge consumers face when evaluating evidence concerns the potential for researcher biases to influence the evidence that is considered or the manner in which that evidence is interpreted. The potential for such biases is a particular concern for traditional narrative literature reviews, and systematic meta-analytic summaries are preferred because they are less subject to these biases.<sup>18</sup> To obtain an impartial summary of the Rorschach validity evidence, a “blue-ribbon panel” led by Robert Rosenthal, a highly respected statistician, methodologist, and meta-analytic researcher, was commissioned to review and compare the validity of the two most commonly used clinical personality assessment measures, namely the Rorschach and the MMPI/MMPI-2. More important, Rosenthal had not previously conducted research on the Rorschach or MMPI/MMPI-2 and had no professional or personal investment in the outcome of the review.<sup>19</sup> We include Tables 4 and 9 from the review panel’s initial article<sup>20</sup> on page 236, and Table 1 from their follow-up article<sup>21</sup> on page 237 of the Appendix. Both articles reached the same conclusions that the MMPI/MMPI-2 and Rorschach validity estimates were not reliably different from each other.<sup>22</sup> The panel also found that the magnitude of the Rorschach and MMPI/MMPI-2 validity was about as good as can be expected for personality tests.<sup>23</sup>

#### ETHICAL USE AND PROFESSIONAL PRACTICE

An important caveat to our statement regards the proper and appropriate use of the Rorschach for its intended purposes. Ethical and competent use of the Rorschach requires proper training, periodic evaluation and continuing education, and reliance

on established and well-researched techniques for administration, coding, and interpretation. As with any test, those using the Rorschach are responsible for its proper application and interpretation. Several specific recommendations can be made that will enhance ethical and professional practice. First, as part of standard clinical care, Rorschach-based inferences, as with inferences from all psychological tests, should be integrated with information from other sources, such as clinical interview and collateral material. Second, clinicians should recognize factors specific to Rorschach testing that may affect or modify interpretation of its scores, such as how engaged a client was with the task.<sup>24</sup> Third, the importance of standardized administration and scoring cannot be overstressed. Atypical administration and scoring can lead to incorrect inferences and risk misinterpretation of Rorschach findings. Fourth, it is important to attend to the research literature to ensure Rorschach inferences are consistent with the evidence. For instance, data have consistently shown a common depression index (DEPI) does not identify interview-based diagnoses of major depression, though common psychosis indexes.

(SCZI, PTI, TDI) are associated with interview-based diagnoses of psychotic disorders.  
25

In addition, although members of the Board are not aware of psychologists who engage in this kind of practice, it has been asserted that some clinicians use Rorschach findings alone to draw a legal conclusion or determine if a historical event occurred, such as trauma or childhood sexual abuse. Such a practice is indefensible with the Rorschach, as it is with any other personality test.

In conclusion, the Board encourages assessment professionals to serve their clients by avoiding undisciplined practice, as such behavior risks harming patients and other clients, discrediting tests, and discrediting the profession more generally. We encourage psychologists who are aware.

OFFICIAL STATEMENT BY THE BOARD OF TRUSTEES of practitioners using the Rorschach or other assessment instruments in an unethical manner to confront those practitioners and if necessary to take further action.<sup>26</sup>

#### RORSCHACH AND LEGAL SETTINGS

We wish to address as well challenges to the use of the Rorschach in court.<sup>27</sup> Although court and legal settings require a higher level of expertise in the use of the Rorschach for expert testimony, articles summarizing the utility of the Rorschach as an instrument indicate that the Rorschach meets the variety of legal tests for

admissibility, including validity, publication in peer reviewed journals, and acceptance within the relevant professional community.<sup>28</sup>

## CONCLUSIONS

We recognize that differences of opinion are crucial to the scientific enterprise and we welcome rigorous investigations of specific claims for the validity of specific Rorschach indexes, as we do with all personality assessment techniques. We also recognize that the use of particular instruments in practice is, in part, a matter of personal preference. However, we disagree with the wholesale rejection or discounting of any particular technique where the scientific data do not warrant it. Therefore, it is the position of the Board of Trustees of the Society for Personality Assessment that the Rorschach possesses documented reliability and validity similar to other generally accepted test instruments used in the assessment of personality and psychopathology and that its responsible use in personality assessment is appropriate and justified.

## ENDNOTES

<sup>1</sup>For example, for criticisms of the Rorschach, see Garb, Wood, Nezworski, Grove, and Stejskal (2001), Lilienfeld, Wood, and Garb

(2000), Wood, Lilienfeld, Garb, and Nezworski (2000b), Wood, Nezworski, Garb, and Lilienfeld (2001a), Wood, Nezworski, Lilienfeld, and Garb (2003), and Wood, Nezworski, and Stejskal (1996a, 1996b); for reviews of evidence supporting reliability and validity, see Meyer (2004), Meyer and Archer (2001), Meyer et al.

(2002), Viglione (1999), and Viglione and Hilsenroth (2001). For a broader perspective, see Bornstein and Masling (2005) and Exner (2003) who provide historical reviews of the various controversies that have arisen about the Rorschach since its original publication in 1921 (Rorschach, 1921).

<sup>2</sup> For a review of these arguments, see Garb (1999), Grove and Barden (1999), Grove, Barden, Garb, and Lilienfeld (2002), Lilienfeld et al. (2000), and Wood et al. (2003); although for rejoinders, see Hibbard (2003) and Ritzler, Erard, and Pettigrew (2002a, 2002b).

<sup>3</sup> For recent meta-analytic reviews of Rorschach validity or incremental validity, see Bornstein (1999), Grønnerød (2004), Hiller, Rosenthal, Bornstein, Berry, and Brunell-Neulieb (1999), Jørgensen, Andersen, and Dam (2000, 2001), Meyer (2000), Meyer and Archer (2001), Meyer and Handler (1997, 2000), Rosenthal, Hiller, Bornstein, Berry,

and Brunell-Neulieb (2001); for meta-analytic reviews of inter-rater reliability, see Meyer (2004) and Meyer et al. (2002); for meta-analytic reviews of test-retest reliability or the stability of scores over time, see Grønnerød (2003) and Roberts and Del Vecchio (2001). For a review of research documenting incremental validity, see Viglione and Hilsenroth (2001); and for a contemporary study examining the reliability of clinicians interpreting the Rorschach, see Meyer, Mihura, and Smith (2005).

4 See Exner (1995, 1996), Nezworski and Wood (1995), and Wood et al. (1996a, 1996b).

5 For example, *Psychological Assessment* (Meyer, 1999, 2001); *Assessment* (Archer, 1999; Wood, Nezworski, Stejskal, Garven, & West, 1999); *Journal of Personality Assessment* (Kinder, 2001).

6 See *Clinical Psychology: Science and Practice* (Aronow, 2001; Exner, 2001; Hunsley & DiGuilio, 2001; Meyer, 2001; Widiger, 2001; Wood, Nezworski, Garb, et al., 2001a, 2001b); *Journal of Clinical Psychology* (Garfield, 2000a, 2000b; Lerner, 2000; Weiner, 2000; Wood et al., 2000a, 2000b); *Journal of Forensic Psychology Practice* (Gacono, 2002; Hamel, Gallagher, & Soares, 2001; Wood, Nezworski, Stejskal, & McKinzey, 2001), and *Psychology, Public Policy, and Law* (Grove et al., 2002; Ritzler et al., 2002a; 2002b).

7 For overviews see Meyer and Archer (2001) and Weiner (2001).

8 Meyer (Ed.; 1999, 2001).

9 Meyer et al. (2001).

10 “Validity coefficients for many psychological tests are indistinguishable from those observed for many medical tests. For instance, when considering validity coefficients in the .30-.50 range, one finds results from the MMPI, Millon Clinical Multiaxial Inventory, Thematic Apperception Test, Rorschach, Hare Psychopathy Checklist, various neuropsychological and cognitive tests, and the impact of psychological assessment feedback on the subsequent well-being of patients. One also finds results from electrocardiograms, mammography, magnetic resonance imaging (MRI), dental radiographs, Papanicolaou (Pap) smears, cardiac fluoroscopy, single photon emission computed tomography, technetium bone scanning, and serum cholesterol level.” (Meyer et al., 2001, p. 135).

11 Meyer and Archer (2001).

12 MMPI: Hathaway and McKinley (1943); MMPI-2: Butcher, Dahlstrom, Graham,

Tellegen, and Kaemmer (1989).

13 Meyer and Archer (2001, pp. 491-492).

14 Weiner (1996).

15 See Hunsley (2003) and Hunsley and Meyer (2003).

16 See Fowler, Piers, Hilsenroth, Holdwick, and Padawer (2001), Hartmann, Sunde, Kristensen, and Martinussen (2003), Hartmann, Wang, Berg, and Sæther (2003), Janson and Stattin (2003), Meyer

(2000), Stokes, Pogge, Powell-Lunder, Ward, Bilginer, and DeLuca

(2003), and Sultan, Jebrane, and Heurtier-Hartemann (2002).

17 See Viglione and Hilsenroth (2001), which summarizes findings described in Viglione (1999).

18 See Hunter and Schmidt (2004) or Lipsey and Wilson (2001).

19 At the same time, to ensure each test was adequately represented, the panel included researchers with recognized meta-analytic expertise applied to the Rorschach (Robert F. Bornstein) and the MMPI/MMPI-2 (David T. R. Berry).

20 Hiller et al. (1999).

21 Rosenthal et al. (2001).

22 “In a meta-analytic comparison of criterion-related validity coefficients for the MMPI and for the Rorschach, we found both instruments to have validity effect sizes of substantial magnitude, (unweighted mean  $r$  of .30 and .29 for the MMPI and Rorschach, respectively). Validity estimates for the MMPI and Rorschach were not reliably different from each other, even when studies in which test predictors and criterion variables had common measurement methods were removed from consideration. ... The methodological features of this study, including random sampling from the published literature, expert judgments for inclusion of validity evidence, and the use of accepted effect size estimation techniques, lend greater credibility to these results compared with those from previous efforts.” (Hiller et al. 1999, pp. 291-292).

23 “As noted by Cohen (1988), ‘when one looks at the near-maximum correlation coefficients of personality measures with ... real- life criteria, the values one encounters fall at the order of ...  $r = .30$ ’ (p. 81). In other words, validity for these instruments is about as good as can be expected for personality tests.” (Hiller et al.,

1999. p. 291).

24 See Meyer (1993, 1997).

25 See Jørgensen et al. (2000, 2001). DEPI = Depression Index, SCZI = Schizophrenia Index, PTI = Perceptual-Thinking Index, TDI = Thought Disorder Index.

26 The Code of Ethics of the American Psychological Association

(APA, 2002) can serve as a guideline for further action, including, when appropriate, filing an ethical complaint with the APA, relevant state association, Board of Examiners, or other professional association.

27 Grove and Barden (1999); Grove et al. (2002), and Wood, Nezworski, Stejskal et al. (2001).

28 Gacono, Evans, and Viglione (2002); Hilsenroth and Stricker (2004) McCann (1998); Ritzler et al. (2002a, 2002b).

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APPENDIX: Supporting Tables Supporting Table From a Review of Psychological and Medical Test Validity by Meyer et al. (2001)

Supporting Table from a Review of Psychological and Medical Test Validity by Meyer et al. (2001) (Continued)

Supporting Table From a Review of Psychological and Medical Test Validity by Meyer et al. (2001)

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