
Hermann Rorschach: A Centenary Tribute

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Abstract

The review evaluates selected issues and developments in the field of Rorschach Psychodiagnostics over the past 60 years. Among the issues discussed are the little known facts about the life and work of Hermann Rorschach, the early beginnings of the Rorschach technique, phase of its popularity, criticism levelled against it and the work done in India. Around 130 studies carried out in India have been briefly reviewed. The Rorschach technique has undoubtedly made an impact in the field of Clinical Psychology and Mental Health in this country, but during the birth centenary year of the originator of the technique, one is faced with the issue of its uncertain future and a possible eclipse.

Key words -

**Hermann Rorschach,
Rorschach techniques,
Psychodiagnostics,
Developing countries,
Review**

The year 1984 heralds the birth centenary of Hermann Rorschach who was born in Zurich on November 8, 1884. He was the eldest among the 3 children and lost his mother when he was 12 years old and his father when he was 18. At school, he was a good student but not extraordinary and was nicknamed "Klex" which meant "painter" or "inkblot". He thought of following his father's footsteps and becoming an arts teacher and also toyed with the idea of studying natural sciences but he ultimately decided in favour of medicine. Between 1904 and 1909 he attended the Neuenburg, Berlin, Bern and the Zurich Universities and qualified in 1912 from Zurich. He was exposed to the ideas of Bleuler, Freud and Jung, while he was studying medicine and worked with Bleuler for his dissertation on reflex hallucinations and kindred manifestations.

Hermann Rorschach (1884-1922:1984)

Between 1909 and 1913 Rorschach worked as an assistant physician at an asylum at Muensterlingen and then at Meunsingen. In 1910 he married a Russian colleague and 3 years later went over to Russia to work in a private sanatorium. He returned to Switzerland soon thereafter and started working at the asylum at Waldau and in 1915 became the associate director of an asylum at Herisau. He got a daughter in 1917 and a son 2 years thereafter.

Hermann Rorschach has been described as a congenial co-worker, an extraordinary colleague, and a kind person who possessed outstanding qualities of a practical psychiatry and a research scientist [1], [2]. "Flexibility of character, rapid adaptability, fine acumen and a sense for the practical were combined in Hermann Rorschach with a talent for introspection and synthesis. It was this combination which made him outstanding. In addition to this rare nature, which

tempered personal emotional experience with practical knowledge, he possessed sound traits of character most valuable in a psychiatrist. Most important of these were an unerring tendency to search for truth, a strict critical faculty which he did not hesitate to apply to himself, and a warmth of feeling and kindness". He was however known to be impractical about financial and other material matters.

Antecedent Factors

The stimulus for the development of the Rorschach technique can be traced to 3 different sources. Rorschach's active interest in the psychological use of the ink-blot seems to have been aroused between 1910 and 1912 by a former classmate who, as a teacher, employed blots in the classroom and examined the effects of stimulating the creative writings of school children by confronting them with formless blots. Rorschach was impressed by the great difference in the student's responses to the same blots and he pondered over the possible relationship between the blot responses and personality traits. At this stage there is no evidence of any active involvements in this area of Rorschach.

In 1917, he came across the dissertation of a Polish student, Szymon Hens, who had studied medicine at Zurich and had devised an ink-blot test of 8 cards which he administered to 1000 children, 100 normals and 100 psychotics. He attempted to study the fantasy of individuals by concentrating on the content. At the end of his dissertation, Hens raised several questions:

1. What does it mean when some people use all the blot for their interpretations while others use only parts
2. Would coloured blots give different results from those obtained with black and white blots
3. Could this method be used to diagnose psychosis?

Rorschach was also influenced by the writings of the Norwegian psychophysicist John Mourly Vold (1850-1907) who pointed out that-

1. Kinesthetic imagery is stimulated by restrictions of muscular activity and is inhibited by movements of muscles and
2. Kinesthetic perceptions form the most important part of the material of dreams.

Rorschach used Vold's ideas to assert that the inhibition of impulses tends to stimulate the production of fantasy, the content of which is determined by dynamic variables such as complexes and repressions. Vold's influence on Rorschach can be seen from the fact that Rorschach applied the term "introversives" to those persons who tend to inhibit their movements or impulses and who turn inward upon themselves for understanding and creativeness. They are characterised by a more individualised and imaginative intelligence, stable emotional responsiveness, more inner life with less adaptability to their external world, more intensive than extensive rapport and controlled but awkward and clumsy motility. He used the term "extratensive" to those persons who tend to express their movements or impulses and who thus interact with the environment and direct themselves outward. They are characterised by a stereotyped or imitative and conforming intelligence, labile emotional reactions, more outward life with greater adaptability to their external world, more extensive than intensive rapport and a restless but skilled and adroit motility. He did not think of introversives and extratensiveness as representing constitutional types but as two modes of psychological functioning which are not mutually exclusive. In each person both modes of functioning co-exist in some proportion. In some individuals both may be highly developed, whereas in others both may be minimally in evidence, with several transitions between these extremes being possible. Rorschach

thought of the "Erlebnistypus" or an index of the individual's introversive-extravertive balance which Beck later named as the "experience balance".

Genesis and Frustration (1917-26)

In 1918, Rorschach began experimenting with ink-blot tests with his patients as subjects. He hurriedly worked on his book, "Psychodiagnostik", in fact so hurriedly as to impair the clarity of the text. He sent the set of 15 ink-blot tests and the manuscript to 7 publishers which was rejected and returned by all. Finally, in 1920 it was accepted by a publisher on the condition that just 10 cards would be published. The book and the cards were published in 1921 with several unsolicited contributions made by the printer. The size of the cards has been reduced, their colours altered and furthermore, though the original cards had uniform black and white areas, the printer in reproducing them introduced a variety of shadings. Rorschach was not upset by these but was delighted to think of the possibilities which the shadings of the blot tests might afford.

His work was a complete failure and most of its copies remained unsold in the basement of the publishing house. Rorschach's colleagues were impressed by his ability to understand his patients solely on their responses to the blot tests, but they were not enthused to find out how he did it. Very little interest was shown in the test when it was presented to the Swiss psychiatric Society, Swiss Psychoanalytic Society and the German Society of Experimental Psychology. The method was generally denounced as faulty, arbitrary, artificial and incapable of understanding human personality. It has been opined that the test was not taken seriously as Rorschach lacked the prestige associated with a university affiliation. Rorschach was clear that his conclusions were grounded in his observations rather than deduced from a theory. His concern was mainly in differentiating latent schizophrenia from obsessive compulsive neurosis and he stated that his test was primarily designed as an aid to clinical diagnosis. It is an irony that in later years the Rorschach technique established itself primarily as an instrument for personality assessment and secondarily as a diagnostic aid. Beck's [3] contention that Rorschach attempted "nothing less than to map the landscape of the mind" is debatable. On April 2, 1992 when the technique he developed was neither accepted nor established. Hermann Rorschach died prematurely at a young age of 38 years, due to appendicitis complicated by peritonitis. With only failure and criticism to his credit, Bleuler's tribute that "Hermann Rorschach was the hope of an entire generation of Swiss Psychiatry" seemed odd. In retrospect, in this centenary year it no longer seems out of place, for it turned out to be a prophecy that came true and essentially reflected the confidence of a teacher who had discovered his student though the rest of the scientific community had not.

Phase of Coincidences (1927-36)

Emil Oberholzer who worked with Rorschach, taught the technique to an American Psychiatrist, David Levy, who was studying in Switzerland. In 1921, Levy returned to USA carrying a set of cards with him.

In 1912, Samuel J. Beck, a Rumanian who had immigrated to the United States won a fellowship to

Harvard to study the Classics. He was very keen on the subject but as he was not the best in the class, lost his fellowship in 1915 and hence decided on a career as a newspaper reporter, the last three years of which were spent in covering criminal and juvenile courts. Ten year later he returned to Harvard and completed his graduation. By that time, his life experiences had caused him to be more intrigued with people and their troubles and hence he decided to enroll for a program in psychology. When he joined Columbia University, he was committed to the traditional experimental psychology. As a second year student, he received a fellowship to work for two days per week at the Institute of Child Guidance in New York city where the senior psychiatrist was David Levy. On an afternoon in 1927, when Beck's wife was a bit late in meeting him he happened to share with Levy his misery about deciding on an acceptable dissertation topic. Levy suggested the Rorschach and Beck's initiation into the area occurred because of these coincidences. Beck's advisor, Prof. R.S. Woodworth was very cautious in his endorsement of Beck's research plan and provided him with inputs which had an enduring effect on Beck's research plan and provided him with inputs which had an enduring effect on Beck's work in Psychology and the Rorschach, for throughout his life he tirelessly strived to make Rorschach a scientific tool. Beck along with Levy published a paper on the Rorschach in 1931 and had 4 papers to his credit by the time the dissertation was completed. By then the technique had already been mentioned by Morgan [3] in a book published in 1928.

In 1934, Beck was awarded a Rockefeller Fellowship to study in Switzerland with Emil Oberholzer. He was dismayed by several things. Rorschach's colleagues adhered to a clinical orientation and used single cases to illustrate interpretative conclusions, which lacked scientific rigour. As the Rorschach monograph was in German, its impact in other countries was minimal. Lastly, as the original blots used by Rorschach had no shading but the published blots did have it, scoring for this category of responses had to be developed. Beck attempted to overcome each of the obstacles. In 1937, Beck's first major work-Introduction to the Rorschach Technique-was published as the first monograph of the American Orthopsychiatric Association. Beck never wavered from his strong belief that that the technique must be demonstrated as both reliable and valid. Beck [3] who supported an empiric-inductive approach, spoke of the "description of personality in algebra" and pointed out that "I have no illusion that this is attainable. But an objective that is not attainable is still an incentive. How near to it can psychology reach? The task calls for statistical labour of a kind which may still have to be devised".

Yet another coincidence occurred in 1933. Bruno Klopfer who held a senior position at the Berlin Information Centre for Child Guidance, was compelled to leave Germany in the light of intense pressure from the Nazis. En route to the USA, while he spent a year to Zurich, he learnt the Rorschach technique and with this experience went over to Columbia as a Research Associate. Klopfer who had become a Rorschach enthusiast, organised informal workshops at his home and soon started conveying the proceedings of these by mimeoed newsletter - *The Rorschach Research Exchange*. Klopfer supported a subjective phenomenological approach to the Rorschach technique.

From Optimum to Pessimism (1937-56)

From the late thirties, the use, popularity and the importance of the Rorschach technique grew immensely. By 1943, Rorschach references accounted for 39.3 percent of all test references and his trend stabilised at about a third of test reference till mid fifties [4]. During these 2 decades, when the

predominant function of a clinical psychologist was that of psychodiagnostics, giving the Rorschach became synonymous with psychodiagnostics. The all pervasive nature and importance of the test was too widespread to be missed. There was a generalised optimum about the technique and it was accepted as useful, penetrating, subtle and a significant psychological procedure. It was often compared to the Stanford-Binet in importance and usefulness and whenever conflicting results were obtained the Rorschach scores were considered more valid [5].

Gradually, a major shift from optimism to pessimism was seen and the Rorschach technique started encountering criticism. It was pointed out that there is no consistent and testable theory underlying the technique. Piotrowski [6], discussing the theoretical foundations of the Rorschach, suggested that the cardinal principle is that there is no perception without selection and the selection reflects the total personality, life interests, the intensity and variability of emotions and anxiety and even the degree of activity. The indeterminateness of the stimuli is also significant, insofar as it is through the process of introducing definite and exact meaning into indeterminate situations that an individual reveals his habitual way of looking at the world. This is not unequivocal in acceptance, for each Rorschacher has attempted to construct a self-contained Rorschach theory and neglect the links between the Rorschach technique and theoretical psychology as a whole which has led to personality theories making very little contact with Rorschach theory.

The Rorschach community failed to provide consistency in scoring and interpretation. Each authority showed an isolationistic tendency, to consider his own ideas as objective and scientific and treat divergent opinions as specious. Thus, in addition to the original system of Rorschach himself, several major scoring systems like that of Beck, Hertz, Klopfer, Piotrowski, Schafer - Rapaport came into existence; not to speak of many minor variations. Each of these Rorschach systems was criticised as the cult of the initiated who used in involved terminology undecipherable to outsiders. It was to this isolationism and equivocality that Exner [7] addressed himself and tried to provide a common language and methodology.

In the Rorschach performance the sole determiner of the responses is not the personality of the subject alone but non-projective determiners of the response like the personality of the tester, and the tester-subject interaction plays a major part was soon obvious. Its administration, scoring and interpretation were felt to be too subjective and this along with the variations of the systems were seen as contributing to a general lack of scientific rigour.

The lack of norms and poor statistical sophistication in the area have also been highlighted.

Non-availability of norms, however, is not a major shortcoming as it is made out to be by the critics of the technique but it must be conceded that Roschachers fail to alter or modify their interpretative system in response to empirical findings.

The reliability and validity were found wanting when the technique came under serious scrutiny. The Rorschach interpretations are so complex that they are not easily verifiable. There has been hardly any experimental validation of the technique and it has not been amenable to traditional reliability measures. A substantial number of clinicians asserted that measuring the reliability of the Rorschach is inappropriate when its purpose is not so much to measure as to describe. A significant number of studies have examined the consistency in responding, the reliability of scoring and the reliability of interpretation of the Rorschach. Hertz and Rabenstein [8] showed the consistency in the blind interpretation done by Beck, Hertz and Klopfer but later studies by Levy and Khan [9], Cohen [10], Haugk [11] Piciuccio [12] and Harrower [13] have shown the inherent weakness. It is felt that even well

trained clinicians can get influenced by what they expected to find on the Rorschach. Divergence of opinion exists about its validity as well. The focus has been on concurrent and predictive validity of the technique. Though this has been found to be wanting Goldfried et al [14] provide a bright picture. Rorschach wrote that in scoring the responses given by the subjects, the content is considered last. The Rorschach traditionalists relegate content analysis to a backseat while the revisionists accord it a place of honour and thus this has been an area of conflict among Rorschachers. Those who support it, criticise workers like Klopfer for neglecting content analysis while the opponents of content analysis stress that it is a primitive habit of reverting to pre-Rorschach days if one were to underemphasise structure and focus on the content. the Jackson and Wahl [15] survey showed that in the mid seventies a high emphasis was placed on content analysis.

The Rorschach has been criticised in an unconventional manner by Rosen [16] who stressed that the Rorschach should be used to find glimpses of the unexplored potentialities of an individual than just look for areas of disturbance.

Gradually over the years with all the criticism that mounted against the technique, the continued use of the Rorschach seemed to be based more on personal faith and convictions rather than or logical evaluation.

Eclipse: Partial or Total?

The technique started suffering considerable eclipse in its popularity from the mid-fifties. The Rorschach references as a percentage of references to all tests dropped steadily and by 1970 accounted for approximately 10 per cent of test references [4]. The technique however cannot be considered as just a part of history [17]. Burstein [18] pointed out that "it is a tribute to the vigour of the core notion" that the test has survived for well over half a century. A survey by Ritzler and Del Gaudio [19] showed that 94 per cent of Canadian and American programmes in Clinical Psychology teach Rorschach and in approximately half of these it was the sole or major assessment technique that is taught. Yet other surveys [20], [21], [22] confirmed, in the late seventies, its generalised popularity and continuing use.

Indian setting

The use of Rorschach made its initial impact in India during the period when it was at its Zenith in the international arena. From the available literature, the earliest study reported is one by Kaliprasad and Asthana [23] who published it in 1947 in the 'Indian Journal of Psychiatry'. Closely following this was a sociocultural study [24] published a year later by Singh. After these two early studies, during the fifties, nine more studies could be traced. Much of the work on the Rorschach in this country has been carried out during the period when its utility had come under scrutiny and criticism in the Western countries.

The widespread use of the Rorschach in the clinical setting has been commented upon by several clinicians. Prabhu [25], [26] opined that the Rorschach is one of the most widely used assessment techniques by clinical psychologists in India. This impression was confirmed by a survey [27] conducted a year later. Its use along with other projective techniques was commended by Shukla [28].

Analysing the utilisation of tools used in research publications made during the period 1974 to 1980 in the two official journals of professional bodies of clinical psychologists and psychiatrists, Dubey et al [29] pointed out that the use of the Rorschach for research purposes is very prevalent in the Indian set up and among the sixteen most commonly used tools, Rorschach is the most popular.

From the available literature, it is obvious that the system of Klopfer and Beck are the frequently used methods in India. Of the two, Klopfer's system has a greater adherence than the latter. The methods advocated by Piotrowski as well as Schafer-Rapaport have also been used. The other methods do not seem to have been generally favoured in the Indian set up either for clinical or research purposes.

Basic Issues

In a country of the size of India, unless extensive work is carried out it is difficult to develop norms on a national scale for any test. This difficulty is obvious with regard to the Rorschach as well. Following the method of Beck, Asthana's early studies [30], [31] provide the norms for the Indian population. The much quoted [29], [32], [33], [34], [35] study by Asthana [36], is not a published study and hence its utility has remained unusually circumscribed. Asthana has worked with the Rorschach technique over a period of three decades and is one of the few research workers in India who has worked with the Rorschach technique consistently. In 1967, Prabhu [37] using the method of Klopfer published norms for use with Indian clients. Earlier, using the method advocated by Rapaport Kumar [38], [39] had published his normative data. Thereafter, other workers [49], [41] have also provided similar data, but the samples used by these workers were not taken from the general population but were matched with the clinical groups on which they were doing their research. D 'Netto et al [42] and thereafter Dubey [43], [44], [46] have carried out the Rorschach technique on army personnel and have provided the norms applicable to that population. In the Indian set up, thus, along the systems advocated by Beck, Klopfer and Rapaport normative data is available. Except in the study of Asthana, which is unpublished, the samples used in the other studies are small. None of the samples can be considered as free from different types of bias.

A series of studies have been carried out by research workers who attempted to establish the validity of the Rorschach technique. In some of these [37], [47], [50] this has mainly been by way of comparing the diagnostic findings on the Rorschach with the clinical diagnosis made by a psychiatrist. More specific studies, where selected Rorschach indices have been compared with specific findings obtained from other tests have also been carried out. Mathur and Pais [51] tried to establish the validity of the Introversive-Extravertive balance ratio on the Rorschach with the SCT and extraversion score obtained by the respondent. Pratap and Filella [52] studied the relationship between the Rorschach indicators of anxiety and the scores obtained on the Taylor's Anxiety Scale. Ray Chaudhuri and Mukherjee [53] tested the validity of Rorschach's original hypothesis with regard to kinesthetic imagery. In a later study [54] they tried to validate homosexuality signs of the Piotrowski's alpha diagnostic formula. Similarly Vagrecha and Sen Majumdar [56], [57] evaluated the use of Piotrowski's signs. The validity of the hostility content on the Rorschach was studied by Shivadasani [58]. Sinha and Sharan [59] wanted to establish the relationship between Rorschach scores and the indicators of maladjustment. Mochhala and Shah [60] tried to establish the behaviour correlates of colour responses given on the Rorschach. A cross validation of objective Rorschach was attempted by Verma & Kumar [61] while Pershad et al.

have evaluated the utility of pathognomic Rorschach signs.

Dubey and his co-workers [63], [65] have raised a series of issues that come up in the interpretation of the Rorschach scores. Their main concern has been with the interpretation of the Rorschach scores from records of varying length. Similar issues concerning the relationship between the total responses and other Rorschach scores was raised earlier by Jain and Prakash [40].

The use of the Rorschach with children was first reported by Lalitha [66] in 1957. Thereafter several others [67], [68], [69], [70] have used the Rorschach with normal children. In one of the earliest studies Bagh [71] communicated his findings on the use of Rorschach with adolescents. The utility of the Rorschach with schizophrenic [72], mentally retarded [73], orphaned [74] and disturbed [75] children has been reported. In 1971, Asthana [36] has reported his normative data on a large number of children.

The Rorschach, consisting as it does of ambiguously structured ink-blot patterns seemed at first to be an ideal culture-free instrument and suitable for evaluating the personality functioning of diverse people. Soon it became clear that it is not, and even if it is, the one administering and interpreting it is not and valid Rorschach interpretation can only be obtained after the psychologist has immersed himself in the culture in which he wants to do the testing.

Singh [24] was one of the earliest Indian investigators who stressed the fact that the use of Rorschach is not culture free. Thereafter several studies [70], [76], [77], [78], [79], [80], [81], [82], [83], [84] conducted in India have shown the cultural impact on the Rorschach responsiveness, productivity and content especially among the various tribal groups.

Clinical Studies

A large number of studies have reported clinical uses of the Rorschach technique. It has been widely used with schizophrenics. The studies reported by Kumar [85], [86] and Bagadia [48] have used large samples of 210 and 250 patients respectively. The other studies reported [35], [46], [47], [60], [87], [88], [89], [90], [91], [92], [93] have been on comparatively smaller populations. Some of these have studied a single group of schizophrenics and have compared the findings obtained with the Western norms that are available. Other studies have concentrated on finding the differences between the responses given by schizophrenics when compared to the responses given by other clinical groups. A study on paranoid schizophrenics [94] has also been reported.

Studies [38], [47], [91], [95], [96], [97] reported on individuals with affective psychoses have been limited in number. In an extensive study, Bagadia et al. [49] analysed the records of 223 patients with depression.

Several studies have reported the findings on various neurotic groups. Some of these studies [48], [98], [99], [100] have used "neurotics" as a whole while some other studies have tried to study specific groups like those of anxiety [47], hysteria [47], [91], [101] and obsessive compulsive neurosis [32]. Rorschach findings on various groups of individuals suffering from psychosomatic conditions have also been reported. Thus, studies on patients of headache [102], ischemic heart disease [103], bronchial asthma [104], peptic ulcer [33], [105], alopecia areata [34] and sexual impotence [106], [107] have been reported.

The Rorschach profile of individuals suffering from different types of physical illness are also available. Between 1971 and 1975 four studies [41], [56], [57], [108] reported the Rorschach profiles of

epileptics. A study conducted on patients suffering from tuberculosis has been reported [109] by Dubey. In 1976, D'Netto & Kishore [110] reported Rorschach findings on individuals with head injury. Two studies [43], [111] were carried on individuals with mental handicap. At the other extreme the studies by Ray Chaudhuri and Mitra [112], [113], [114] concentrated on creativity and the work by Lalitha [66] studied imagination while Lal [115] and Mohan et al [116] were mainly concerned with the relationship between intelligence and the Rorschach output.

From the very beginning the Rorschach study of delinquents seems to be extensive. Between 1948 and 1976, a series of studies [24], [79], [80], [117], [118], [119], [120], [121], [122], [123], [124], [125] have been reported in this area. In a similar fashion considerable number of studies have reported the Rorschach profile of criminals and murderers [54], [80], [126], [134].

The Rorschach study of certain special groups have also been reported. In one of the earlier studies Mukherjee [135] reported his findings on the parents of disturbed children. Hussain, Gulati, Singh and Moni [136] gave their findings from Goa with regard to the Rorschach profiles of unwed motherhood. Alcoholics were studied by Arora [137] and recidivists by Sharma [138]. Malaviya [139] studied individuals who attempted suicide. The study of Malaviya is probably unique in scientific literature which, perhaps because of an editorial accident, has been published twice [90], [130] in the same journal within a gap of one year.

Rorschach workers have tried to study specific functions by making use of the Rorschach. In this, the study of Rorschach hostility and aggression indices has been carried out by a large number of research investigators [53], [58], [93], [125], [134], [140]. Other studies which have utilised the Rorschach extensively are on the disturbances of thought process and thought disorders [87], [92], [141]. Shukla, Hussain and Sinha [131] have used the Rorschach technique to study reality adherence while the technique has been used by other workers to study ego-organisation [143], and ego-strengths [142] of individuals. Noise destructibility, homosexuality [54], authoritarianism [144] and body image of individuals [145] have also been evaluated.

Content analysis has not been given much of prominence in the Indian literature and studies on content analysis per se have not been frequent after the early seventies. Interest in content analysis, thus, has not been in step with the trend seen in the West where it attained high popularity and continued to maintain it till the mid seventies [15]. Tripathi and Jhulka [69] reported one of the earlier studies on content analysis and since then a few more studies appeared till the early seventies [47], [54], [58], [59], [89].

Other Aspects

Studies of individuals who followed different professionals and occupations have also been carried out. In one of the earliest studies Ray Chaudhuri studied the personality of musicians [146]. It was followed by a study by Arundale and Chandra [147] who studied the personality of doctors. Business executives [148] and management trainees [149] have been carried out by Dubey et al [150]. In a recent study Barnes [151] has tried to understand the personality of merchant marine officers by seeking recourse to the Rorschach technique.

Dubey [46] cites 14 doctoral theses, in which the cardinal work was on the Rorschach, submitted to various Indian Universities. Some of them have remained unpublished. Two monographs [46], [123] on

the work done with the Rorschach have also been published. The Rorschach has been an area of interest to workers from several disciplines. With a large number of scientific journals, with highly limited circulation and at times short span of life, it is not possible to trace all the Indian studies available in any area of research interest. The present overview can claim to be comprehensive where an attempt has been made by research workers who have worked consistently with the Rorschach or have made an impact in the clinical setting.

Work at NIMHANS

Emphasis is given to the teaching of the Rorschach technique in all the post-graduate training centres-Bangalore, Ahmedabad and Ranchi-in Clinical Psychology. The first two centres adhere to Klopfer's system while the Ranchi centre which was initially using Rapaport's system [38], [39] switched over to Klopfer's system in the early sixties [37] and later on, since the mid sixties, have been following Beck. At the National Institute of Mental Health & Neuro Sciences, in the training programmes, the Rorschach technique has been given emphasis as a diagnostic tool. In every day clinical practice its use is extensive. Its use as a research tool has been highly restricted and over a period of 25 years just four published studies [87], [88], [101], [102] could be traced. It has been used in 21 post-graduate research projects of which two have been doctoral theses. By way of library copies of the dissertations these are available at the Institute library. These studies have covered a wide area. Post operative changes in neurosurgical cases, and body image disturbances in neurological cases have been studied. Studies on the personality patterns of patients while epilepsy and parkinsonism have been carried out. Patients with schizophrenia, affective disorders, hysteria as well as drug addicts have been evaluated. Suicidal ideation among depressive patients has been the theme of one project. Aggression among children and psychopathology among adolescents has been evaluated by the Rorschach. In the last study Exner's method has been made use of. One of the doctoral dissertations studied creative individuals with the Rorschach technique. In a psychophysiological study the Rorschach has been used along with the progressive matrices test to study the right and left brain activities.

The Future

In the Indian setting the use of the Rorschach for diagnostic purposes had been extensive [27]. As pointed out by Dubey et al [29] in research studies it has been a favoured technique for assessment and evaluation. These two aspects made it attain high importance in the various programmes conducted in the country for training professional clinical psychologists. Shukla [28] highlighted the merits of projective techniques in general and indicated their advantages in the third world countries but Prabhu [25] pointed out that though the projective tests have a seeming advantage of being utilitarian with uneducated and illiterate clients the advantage seems illusory because the respondents tend to give descriptive stories on the TAT while on the Rorschach they exhibit a tendency to be inhibited at the stage of enquiry. This was explained on the characteristic feature in the Indian context of one being inhibited rather than being expressive. Further more, over the last few years, emphasis on short, easy to administer behaviour rating scales has been on the increase in the developing countries, which may

diminish the use of Rorschach in the clinical setting over the coming years. The use of the technique for research purposes showed a steadily increasing trend from 1947 onwards till it reached the peak during the five year period 1970-75 when 31 published studies made use of the Rorschach. Since then its use has been on the wane. This feature does not seem to be a chance occurrence but the natural downward course followed by techniques which have passed the phase of high utility. In the Indian setting there has not been a centre or a group of scientists who have been committed to the use of the Rorschach and who worked consistently with it. Asthana [23] has worked consistently with the test but neither all his work has been published nor has a team of workers surfaced around his important work. Much as one may like to avoid the conclusion, the Rorschach technique at present, seems to be at the cross roads in India. It can claim, with pride a bright past but simultaneously cannot avoid looking at an uncertain future. This in now way should diminish the impact it had on psychology in general and clinical psychology in particular in this country. The course its rise and decline followed in India is not very dissimilar to the one it had in the rest of the world. The only exception had been that it made its entry in the Indian psychological arena a decade after its entry in the Western hemisphere and as if to maintain this initial pattern faced the criticism slightly later and in the same trend, its exit too seems to be delayed. Despite the conclusion one cannot deny that during the last four decades the Rorschach did considerably influence the course of clinical psychology in India.

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