PICTURE THIS!

Murray, H. A. (1938). Explorations in personality (pp. 531-545). New York: Oxford University Press.

In the previous reading, a method clinical psychologists use to expose underlying aspects of personality, called the *projective test* was discussed in relation to Rorschach's inkblot technique. The idea behind Rorschach's test was to allow individuals to place or project their own interpretations onto objectively meaningless and unstructured forms. Also, Rorschach examined a subject's focus on particular sections in the inkblot, the various specific features of that section, and perceptions of movement in the figure, to draw conclusions about the subject's personality characteristics. The content of the subject's interpretation was also taken into account, but was of secondary importance.

Several years after Rorschach developed his test, Henry A. Murray (1893-1988), at the Harvard Psychological Clinic, and his assistant, Christiana D. Morgan, developed a very different form of a projective test called the *Thematic Apperception Test*, or TAT, which focused entirely on the content of the subjects' interpretations. Rather than formless shapes like Rorschach's inkblots, the TAT consists of black-and-white drawings depicting people in various ambiguous situations. The client or subject is asked to make up a story about the drawing. The stories are then analyzed by the therapist or researcher to reveal hidden unconscious conflicts (apperception means *conscious* perception).

The theory behind the TAT was that when you observe human behavior, either in a picture or in real life, you will interpret that behavior according to the clues that are available in the situation. When the causes for the observed behavior are clear, your interpretation will not only be correct, it will be in substantial agreement with other observers. However, if the situation is vague and it is difficult to find reasons for the behavior, your interpretation will more likely reflect something about yourself - about your own fears, desires, conflicts, and so on. For example, imagine you see the faces of a man and a woman looking up into the sky with different expressions on their faces: He looks terrified, but she is laughing. As you observe the situation further, you see that they are waiting in line for a ride on "Batman," North America's highest mega-roller coaster located at Magic Mountain theme park in California. It is not difficult to interpret the couple's behavior in this situation and your analysis would probably be more or less the same as that of other observers. Now imagine seeing the same expressions in isolation, without any situational clues to explain the behavior. If you were asked, "What are these people experiencing?" your answer would depend on your internal interpretation and might reveal more about you than about the people you are observing. Furthermore, because of the ambiguity of the isolated behavior, different observers' answers would vary greatly (i.e., they're looking at a UFO, a ski run, small children playing on a high climbing toy, or an approaching tornado). This is the idea behind Morgan and Murray's Thematic Apperception Test, which to this day is a very popular tool among psychotherapists for helping their clients.

THEORETICAL PROPOSITIONS

At the most basic level, the theory underlying the TAT, like that of the Rorschach test, is that people's behavior is driven by unconscious forces. Implicit in this notion is an acceptance of the principles of psychodynamic psychology developed originally by Freud. In this view, unconscious conflicts must be exposed for accurate diagnosis and successful treatment of psychological problems to take place. This was the purpose of Rorschach's inkblot test, discussed in the previous reading, and it was also the goal of Murray's TAT.

Morgan and Murray wrote, "The purpose of this procedure is to stimulate literary creativity and thereby evoke fantasies that reveal covert and unconscious complexes" (p. 530). The way they conceived of this process was that a person would be shown ambiguous drawings of human behavior. In trying to explain the situation, the subject would become less self-conscious and less concerned about being observed by the therapist. This would, in turn, cause the person to become less defensive and reveal inner wishes, fears, and past experiences that might have been repressed. Murray also pointed out that part of the theoretical foundation for this test was that "a great deal of written fiction is the conscious or unconscious expression of the author's experiences or fantasies" (p. 531).

METHOD

In the test's original conceptualization, subjects were asked to guess the events leading up to the scene depicted in the drawing and what they thought the outcome of the scene would be. After testing the method, it was determined that a great deal more about the psychology of subjects could be obtained if they were simply asked to make up a story about the picture, father than asked to guess the facts surrounding it. The pictures themselves were developed to stimulate fantasies in the subjects about conflicts and important events in their own experiences. Therefore, it was decided that each picture should involve at least one person with whom the subject could easily identify. Through trial and error with several hundred pictures, a final set of 20 was chosen. Since the TAT is in common use today, many believe that widespread publication of the pictures used might compromise its validity. However, it is difficult to understand the test without being able to see the type of drawings chosen. Therefore, Figure 1 is one of the original drawings that was under consideration, but was not ultimately chosen as one of the final 20.



FIGURE 1 Example of a TAT card. How would *you* interpret this picture? (Reprinted by permission of the publishers from Henry A. Murray, *Thematic Apperception Test*, plate 12F, Cambridge, MA. Harvard University Press. Copyright © 1943 by the President and Fellows of Harvard College. © 1971 by Henry A. Murray.)

An early study of the TAT was conducted by Morgan and Murray and reported in Murray's 1938 book cited at the beginning of this chapter. The subjects for that study were men between the ages of 20 and 30. Each subject was seated in a comfortable chair facing away from the experimenter (as has been commonly practiced by psychotherapists when administering the TAT). These are the exact instructions given to each subject:

This is a test of your creative imagination. I shall show you a picture and I want you to make up a plot or a story for which it might be used as an illustration. What is the relation of the individuals in the picture? What has happened to them? What are their present thoughts and feelings? Vihat will be the outcome? Do your very best. Since I am asking you to indulge your literary imagination, you may make your story as long and as detailed as you wish. (p. 532)

The experimenter handed the subject each picture in succession and took notes on what the subject said for each one. Each subject was given one hour. Due to the time limitations, most subjects only completed stories for about 15 of the 20 drawings.

A few days later the subjects returned and were interviewed about their stories. In order to disguise the true purpose of the study, subjects were told that the purpose of the research was to compare their creative experiences with those of famous writers. Subjects were reminded of their responses to the pictures and were asked to explain what their sources for the stories were. They were also given a free-association test, in which they were to say the first thing that came to mind in response to words spoken by the experimenter. These exercises were designed to determine to what extent the stories the subjects made up about the drawings reflected their own personal experiences, conflicts, desires, and so on.

RESULTS AND DISCUSSION

Murray and Morgan reported two main findings from this early study of the TAT. The first was the discovery that the stories the subjects made up for the pictures came from four sources: (I) books and movies, (2) real-life events involving a friend or a relative, (3) experiences in the subject's own life, and (4) the subject's conscious or unconscious fantasies (see p. 533 of the original study).

The second and more important finding was that the subjects clearly projected their own personal, emotional, and psychological existence into their stories. One such example reported by the authors was that

most of the subjects who were students identified the person in one of the drawings as a student, but none of the nonstudent subjects did so. In another example, the subject's father was a ship's carpenter, and the subject had strong desires to travel and see the world. This fantasy appeared in his interpretations of several of the drawings. For instance, when shown a drawing of two workers in conversation, the subject's story was, "These two fellows are a pair of adventurers. They always manage to meet in out-of-the-way places. They are now in India. They have heard of a new revolution in South America and they are planning how they can get there In the end they work their way there on a freighter" (p. 534). Murray reports that, without exception, every person who participated in the study injected aspects of their personalities into their stories.

To illustrate further how the TAT reflects personal characteristics, the authors report one subject in detail. "Virt" had emigrated to the United States from Russia after terrible childhood experiences during World War I, including persecution, hunger, and separation from his mother. Picture number 13 of the TAT was given the following written description by Murray and Morgan: "On the floor against the couch is the huddled form of a boy with his head bowed on his right arm. Beside him on the floor is an object which resembles a revolver" (p. 536). Virt's story about this drawing was as follows:

Some great trouble has occurred. Someone he loved has shot herself. Probably it is his mother. She may have done it out of poverty. He being fairly grown up sees the misery of it all and would like to shoot himself. But he is young and braces up after a while. For some time he lives in misery, the first few months thinking of death. (p. 536)

It is interesting to compare this story with other, more recent stories made up about the same drawing:

- A 35-year-old junior high school teacher: "I think that this is someone who has been put in prison for something he did not do. He has denied that he committed any crime and has been fighting and fighting his case in the courts. But he has given up. Now he is completely exhausted, depressed, and hopeless. He made a fake gun to try to escape, but he knows this won't work either" (author's files).
- 2. A 16-year-old high school student: 'This girl is playing hide-and-seek, probably with her brothers. She is counting from one to a hundred. She is sad and tired because she is never able to win and always has to be 'it.' It looks like the boys were playing some other game before because there's a toy gun here" (author's files).

You don't have to be a psychotherapist to make some predictions about the inner conflicts, motives, or desires that these three people might be projecting onto that one drawing. These examples also demonstrate the remarkably diverse responses that are possible on the TAT.

CRITICISMS AND RELATED RESEARCH

Although the TAT uses stimuli that are very different from Rorschach's inkblot test, it has been criticized on the same grounds of poor reliability and validity. The most serious reliability problem for the TAT is that different clinicians offer differing interpretations of the same set of TAT responses. Some have suggested that therapists may unknowingly inject their own unconscious characteristics onto the subject's descriptions of the drawings. In other words, the interpretation of the TAT might, in some cases, be a projective test for the clinician who is administering it!

In terms of validity (that is, the extent to which the TAT truly measures what it is designed to measure), several types of criticisms have been cited frequently. If the test measures underlying psychological processes, then it should be able to distinguish between, say, normal people and people who are mentally ill, or between different types of psychological conditions. However, research has shown that it fails to make such distinctions. In a study by Eron (1950), the TAT was administered to two groups of male veterans. Some were students in college and others were patients in a psychiatric hospital. When the results of the TAT were analyzed, there were no significant differences found between the two groups or among psychiatric patients with different illnesses.

Other research has questioned the ability of the TAT to predict behavior. For example, if a person includes a great deal of violence in the stories and plots used to describe the drawings, this does not differentiate between aggression that merely exists in the subject's fantasies and the potential for real violent behavior. For some people, it is possible to fantasize about aggression without ever expressing violent behavior, while for others, aggressive fantasy will predict actual violence. Since TAT responses do not indicate into which category a

particular person falls, the test is of little value in predicting aggressive tendencies (see Anastasi & Urbinai, 1996).

Another basic and very important criticism of the TAT (which has been made of the Rorschach inkblot technique as well) relates to whether the projective hypothesis itself is valid. The assumption underlying the TAT is that subjects' stories about the drawings reveal something about their stable, unconscious processes about who they are. There is scientific evidence to suggest, however, that responses to projective tests such as the Rorschach and TAT may depend on temporary and situational factors. What this means is that if you are given the TAT on Monday, just after work, when you've had a big fight with your boss, and then again on Saturday, just after you've returned from a relaxing day at the beach, the stories you make up for the drawings might be completely different on the two occasions. Critics argue that, to the extent that the stories are different, the TAT has only tapped into your temporary state and not your real underlying self.

As a demonstration of this criticism, numerous studies have found variations in TAT performance relating to the following list of influences: hunger, lack of sleep, drug use, anxiety level, frustration, verbal ability, characteristics of the person administering the test, the attitude of the subject about the testing situation, and the subject's cognitive abilities. In light of these findings, Anne Anastasi, one of the leading authorities on psychological testing, has written, "Many types of research have tended to cast doubt on the projective hypothesis. There is ample evidence that alternative explanations may account as well or better for the individual's responses to unstructured test stimuli" (Anastasi & Urbinai, 1996).

RECENT APPLICATIONS

Murray's research and the TAT continue to be cited and incorporated in numerous studies of personality characteristics and their measurement. Over 160 such articles appeared in scientific journals between 2000 and the middle of 2003, as the current edition of this book was in preparation.

One study compared TAT responses of patients diagnosed with dissociative disorders, such as *traumatic amnesia* and *dissociative identity disorder* (more commonly known as *multiple personality disorder*), with those of other inpatients in a psychiatric facility (Pica et al., 2001). The researchers found that, among dissociative patients, responses to the TAT cards contained virtually no positive emotions, and the "testing behaviors of dissociative participants were characterized by switching, trance states, intra-interview amnesia (blocking out parts of the TAT interview during testing), and affectively loaded [highly emotional) card rejections" (p. 847).

Murray's 1938 work has also been incorporated into research on personality disorders, including *antisocial personality* (a disregard for other people's rights; lack of guilt or remorse); *avoidant personality* (chronic and consistent feelings of inadequacy); *borderline personality* (intense anger, very unstable relationships); and *narcissistic personality* (exaggerated sense of selfimportance, great need for admiration). Some studies have found that the TAT is successful in differentiating among personality disorders and that TAT scores are consistent with scores on the MMPI (Minnesota Multiphasic Personality Inventory), a widely used and fairly well validated objective personality assessment tool (Ackerman et al., 1999).

Finally, a study by Murray himself that might be of particular interest to many readers of this book, examined the teaching effectiveness of academic psychologists as they age (Renaud & Murray, 1996). The authors found that teaching effectiveness declined with age, and was linked to certain specific personality traits. For example, the trait of *approval-seeking*, which was associated with good teaching, decreased with age, and the characteristic of *independence*, which tended to be associated with poorer teaching, increased with age. It should be kept in mind that the study included only 33 professors from a very small number of institutions and, therefore, may not (and, in the opinion of this author, most likely does *not*!) apply to psychology professors in general.

CONCLUSION

One of the most remarkable aspects of projective tests such as the TAT and the Rorschach inkblot test is that, in spite of a massive body of evidence condemning them as invalid, unreliable, and possibly based on faulty assumptions, they are among the most frequently used psychological tests. The fact that clinicians continue to be enthusiastic about these tools while experimental psychologists grow increasingly wary is a key point of contention between those two groups (see Lilienfeld, Wood, & Garb, 2000, for a review). How can this contradiction be reconciled? The most common answer to this question is that the TAT and the Rorschach tests are usually employed in psychotherapy not as formal diagnostic tool, but rather as extensions of the early give-and-take between clinicians and their patients. It follows, then, that many therapists apply these devices in very individual ways to open up channels of communication with clients and enter psychological domains that might

have been avoided or hidden without the prompting by the stories on the TAT. As one practicing psychotherapist explains, "I don't score my clients' responses on the TAT or use them for diagnosis, but the drawings are a wonderful and valuable vehicle for bringing to light troubled areas in a client's life. The identification and awareness of these issues that flows from the TAT allows for more focused and effective therapy" (author's files).

Ackerman, S., Clemence, A., Weatherill, R., & Hilsenroth, M. (1999). Use of the TAT in the assessment of DSM-IV Cluster B personality disorders. *Journal of Personality Assessment*, 73(3), 422-442.

Anastasi, A., & Urbinai, S. (1996). Psychological testing, 7th ed. New York: Macmillan.

Eron, L. (1950). A normative study of the thematic apperception test. *Psychological Monographs, 64*(Whole No. 315).

Lilienfeld, S., Wood, J., & Garb, H. (2000). The scientific status of projective techniques. *Psychological Science in the Public Interest, 1,* 27-66.

Pica, M., Beere, D., Lovinger, S., & Dush, D. (2001). The responses of dissociative patients on the TAT. *Journal of Clinical Psychology*, *57*, 847-864.

Renaud, R., & Murray, H. (1996). Aging, personality, and teaching effectiveness in academic psychologists. *Research in Higher Education*, *37*(3), 323-340.