

Reprinted from

RORSCHACH PROCEEDINGS

VIIth International Congress of Rorschach and Other Projective
Techniques London
August 5th-8th, 1968



1970

**HANS HUBER PUBLISHERS
BERN STUTTGART VIENNA**

Les vrais arriérés n'utilisent guère que les maisons à enseigne, les plus facilement reconnaissables, et parfois quelques arbres. Ils les alignent en un village-train, dans la forme d'expression la plus simple.

Les pseudo-débiles utilisent davantage de matériel, et sont capables d'identifier les éléments des maisons à construire et de les assembler. Ils utilisent régulièrement les arbres et se servent assez souvent des animaux et personnages. Enfin, ils groupent le matériel qu'ils utilisent, le plus souvent en alignements parallèles, qui ont la particularité d'être beaucoup plus resserrés que chez les autres sujets, exceptés certains psychotiques, mais dont l'expansion en surface n'est absolument pas comparable, par la différence des pourcentages de matériel utilisé.

CONCLUSION

Nous avons essayé de montrer que le test du village permet de constater un rapport entre l'âge chronologique de l'enfant et de l'adolescent et l'expansion en surface du village qu'il est susceptible de construire.

Une variation de même ordre semble exister entre le niveau intellectuel et ladite expansion, cette assertion étant à corriger d'un aspect différentiel aussi facile à apprécier pour qui sait le lire, que les différences de notes aux subtests des tests de niveau chez les pseudo-débiles.

K. WARNER SCHAIE

Mass Psychological Screening of Young Children with the Color Pyramid Test

ABSTRACT

The Color Pyramid Test (CPT) was used as a psychological screening technique to identify children with psychological problems among the participants of the 1965 crash pre-school program for culturally disadvantaged children in West Virginia. The CPT was successfully administered by untrained examiners to 11,496 six year old children during the second week of the pre-school program and readministered to 5,479 children five weeks later.

CPT records were compared with normative samples drawn from middle-class schools and the experimental group was found to show tendency towards withdrawal, greater difficulty in getting involved with objective aspects of their environment and somewhat increased tendencies in the direction of autistic thinking and blocking in the expression of feelings. The screening program identified children suspected of having emotional problems with an incidence from one and one-half to twice as great as would be expected in the comparison population. Data on change as a function of the pre-school program suggested some movement towards cultural norms involving modes of affect expression and impulse control.

INTRODUCTION

This paper is designed to describe some of our experiences in using a projective technique for the detection of personality problems in a large population of pre-school children in a situation where neither trained examiners nor interpreters of psychological data were readily available. Most of the approaches to the personality assessment of young children assume the necessity of detailed studies conducted by highly trained professional persons. Because of the obvious difficulties, very little work has been done on the development of test items which would be suitable for rapid administration by relatively untrained personnel. One of the exceptions which has recently received some considerable psychometric attention is the Color Pyramid Test (HEISS and HILTMANN, 1952; SCHAIE, 1963, 1966; SCHAIE and HEISS, 1964).

This technique can be presumed to be culture-free, does not require verbal behavior on the part of the S, and can easily be taught to untrained examiners. Also, it is suitable for computerized scoring and interpretation.

The standard form of the Color Pyramid Test (CPT) consists of a set of colored one inch-square chips in 24 different hues and a pyramid form containing 15 squares (SCHAIE, 1965). The S is instructed to arrange colored chips on the pyramid to make it as pretty as he can. Three trials are required under the "pretty" condition with another three trials under instructions to make the pyramid as "ugly" as possible. The CPT has been related to various pathological criterion groups as well as to personality traits in normal Ss (SCHAIE, 1962, 1963). In the present study it was used primarily to permit a rough screening operation to identify children likely to show deviant personality traits.

THE SCREENING OPERATION

The Subjects

During the summer of 1965 throughout the United States a massive pre-school program called "Operation Headstart" was conducted for the children of families which by economic yardsticks were thought to live in conditions of poverty. The argument was made that these children did not benefit equally from the public school system due to early environmental deprivation and that a remedial pre-school program might help broaden the children's experience. West Virginia is located in the Appalachian region of the eastern United States and has long suffered from special economic problems caused by rapid technological change in the coal mining industry. Consequently, this state had a particularly large population of children eligible for participation in Headstart. The Headstart program was conducted over an eight week period and testing was conducted during the second and seventh week of the program.

Scorable CPT records were obtained on a total of 11,496 children during the first testing and 5,479 children were re-tested. The average age of the children at first test was 6.17 years (S.D. = .36). The population of children had normally distributed intelligence as measured by Scale 1 of the Culture Fair Intelligence Test (CATTELL, 1962), although with a much wider scatter than in the normative population ($X = 104.9$; S.D. = 25.6).

The Examiners

The personnel used to examine the children consisted of Headstart teachers and other volunteers. Examinations were conducted in approximately 1300 Headstart classes with one or two examiners involved in each instance. Only a few of the examiners had had any previous experience in the administration of psychological tests or other screening techniques. In fact, the only qualification for the examiners was that they had to be literate adults of assumed average intelligence. Very detailed written instructions were given to each examiner so that little or no judgmental activities were required in the process of the examination. Throughout the examination period some limited consultation via telephone was available to examiners in meeting local problems but very little use was made of such consultation.

The only task for the examiner was to instruct each child on the nature of the task and then to record the code number for each particular colored chip which the child placed on a given field of the pyramid. All materials, after having been identified with the child's name and code number were then transmitted to research headquarters.

Test Scoring

After examination of the test materials, it appeared that most examiners quite carefully followed instructions and that the rate of error and loss of materials (approximately 5%) was no greater than one would expect in typical kinds of group testing procedures with older children. The CPT was scored entirely by the IBM 7040 computer. An editing routing first compiled separate tapes containing: (1) the scores on those children who had been tested twice, (2) a tape on all tests administered during the first round, and (3) a tape on all tests administered on the second round. During this process data were edited for mismatched codes and records containing color codes which were uninterpretable. The CPT for each S was punched on a set of seven cards. The computer reads these cards, computes frequency scores for all colors examined and computes the internal consistency of each test record. The computer then places the test results on a new data tape and generates a printed test report with scores for all scoring variables, their conversion into sten (standard ten) scores as compared with a table of norms and the personal identification data required for further analysis.

RESULTS OF THE SCREENING OPERATION

One of the first items of interest is to indicate in what ways, if any, the average data for our population differs from normative samples from a cross-section of the general population of children. Our data permit such analysis at two levels. On the CPT the child is asked to perform the color choice task under two conditions of instruction. First he is asked to construct a pyramid which is as pretty as he can make it. It is assumed that his response here will give an insight into the most salient traits related to affect and impulse control as they currently prevail in the child's personality structure. Under the second instruction, that of making an "ugly" pyramid it is assumed that aspects of the child's personality are tapped which are presently rejected but which consequently may be viewed as important secondary modes of impulse control which may become important if the present adjustment shifts under increased psychological stress. Detailed findings by sub-samples have been reported elsewhere (SCHAIE, 1967). They will here be summarized for the major CPT scoring variable, the color frequencies.

1. Red. Preference for this color represents impulsive affect and in its extreme form explosive impulsivity to be found in children likely to be described as "acting out". Our population scored at about the mean on the pretty pyramids but seemed slightly above the mean under the "ugly" condition, thus reflecting possible further development in the direction of uncontrolled impulse management.

2. Orange. This color represents extroversion and externalization of affect but unlike the preference for Red relates to the ability to become involved with other persons. Our population was below average under the "pretty" and clearly significantly high under the "ugly" instruction. This finding suggests a tendency on the part of these children to divert their expression of emotion into interpersonal channels under conditions of stress. Such tendency has clearly adaptive attributes and suggests the relatively high prevalence of person - rather than object - directed impulse investment at an early age in these Appalachian children.

3. Yellow. High preference for yellow is said to represent involvement in the environment which is primarily object-oriented. Low preference, moreover, is deemed to reflect inability to express impulsive needs in a rational socialized manner. The latter is characteristic of our population which scored significantly low on "pretty"

yellow. Interestingly enough, preference for Yellow increases under the alternate condition of instruction. Perhaps in conjunction with the statement made with regard to Orange we might conclude here that mild stress may be required for these children to elicit increased interaction with the person as well as object-related aspects of their environment.

4. Green. This color reflects the regulatory homeostatic aspects of emotionality. An extremely high preference denotes individuals who are overwhelmed and flooded by emotional stimuli, while extremely low scores reflect low sensitivity and emotional flattening. Our children scored significantly below the normative means, suggesting that rigidification and freezing of emotions may be a salient characteristic of these children. Under the "ugly" condition however, scores averaged about the expected mean.

5. Blue. This color might be characterized as an index of ego strength. It also seems to have some bearing on the children's general energy level, high Blue being characteristic of well-controlled efforts and low scores representing low energy, erratic and uncontrolled behavior. Our population is at average on the "pretty" pyramids confirming the data from intelligence tests suggesting that these children on the average do not seem to be at a significant disadvantage with respect to cognitive function and the ability to respond in an organized well-controlled manner. Under the "ugly" condition these children score above the normative mean, again suggesting the possibility of the beneficial effects of restructuring accustomed response patterns for these children.

6. Purple. Preference for this color seems to be associated with severe internalization of affect, anxiety and tension. High scores represent the presence of explosive turmoil. For the entire group this index of psychopathology is fairly low. Likewise, internalization of affect seems relatively unimportant as an alternate mode of impulse control since the population averages at the normative mean for the "ugly" condition.

7. Brown. Elevated Brown preference represents the presence of strong primitive impulses indicative of emotional dullness and persistent but ineffective activity. Brown has been found to be characteristically high in the color preference of the mentally retarded (SCHAIE, 1962b). But low Brown preference has been associated with low energy level. For our children Brown was at the expected value for the "pretty"

condition. Under the alternate condition Brown is significantly low, implying the possibility of reduction in energy level of impulse expression under stress.

8. White. This color is rarely used by most Ss. When it is used it seems to imply unconventional response tendency and in its extreme form loosening of reality control and autistic thinking. This index is above expected values under both conditions of instruction. For our population as a whole this suggests the high incidence of schizoid personality traits and autistic thinking.

9. Gray. Preference for this color indicates the damping of affective needs and consequent repression and denial of feelings. High incidence of gray is thus characteristic of neurotic personality traits. This index was significantly low for our population. The relative incidence of neurotic behavior as a function of social class is, of course, well known and these data confirm previous findings of low incidence of neurotic traits in an essentially lower class population (HOLLINGSHEAD and REDLICH, 1958).

10. Black. Preference for black is said to reflect inhibition and blocking associated with feelings of inadequacy and worthlessness. The mean score here was above the expected value under the "pretty" but significantly below normative values under the "ugly" condition. If Black is interpreted as an index of inhibitory controls then our findings suggest that increased stress will tend to result in a reduction of such controls in this population.

Identification of Children Likely to be in Need of Special Services

The above comments gave an indication of the general personality characteristics of our population as determined by the screening operation. Of even greater interest, however, was the identification of children who might require future special attention. The CPT can conveniently be used as a screening device by attending to certain parameters using the extreme scores on the color frequencies under the "pretty" sorting instruction.

As has been noted previously, extreme scores on four of the color indices (orange, yellow, green and blue) represent generally favorable personality traits. The remaining six indices, however, will reveal likely presence of psychopathology. As an objective screening criterion we considered a child's sten score of 9 or 10 as an index of possibly deviant behavior. These scores included the most extreme 6.7% of the normative population. Thus, if the proportion of children falling into these extremes is

6.7% or less, then our population contains no more pathology than is characteristic of a normative sample of children their age. A larger proportion, however, would indicate the prevalence of special problems in this group. Extreme scores on six color indices are given in Table 1, in each instance giving the proportion of the sample showing extreme scores.

Table 1. Extreme Scores on Indices of Psychopathology on the Pretty Pyramids (N = 11,496)

	N	% of total population
Emotional Disturbance (Purple)	1324	11.5
Emotional Retardation (Brown)	1242	10.8
Acting-out Behavior (Red)	1296	11.2
Autistic Thinking (White)	1651	14.3
Depressive and Asocial Behavior (Black)	1722	14.9
Neurotic Traits (Gray)	690	6.0

The relevant areas of screening were as follows: (1) Emotional disturbance (Purple), was found to have approximately twice the prevalence in the Headstart population than in the normative comparison group. (2) Emotional retardation (Brown) was found in approximately one and one half times the expected value. (3) Acting-out Behavior (Red) also was found for approximately one and one-half times of the expected value. (4) Autistic thinking (White) was found in better than twice the number of expected cases. (5) Depressive and asocial behavior (Black) was also identified twice as often as expected. (6) Neurotic traits (Gray) finally showed a lower incidence than would be expected.

In summary, our screening program suggests that the prevalence of suspected autistic thinking, depression and asocial behavior, all characteristics which may require eventual institutional treatment, may be almost twice as high in the Headstart group than in the general population. Prevalence of suspected current emotional disturbance, emotional retardation and extreme, acting-out behavior, conditions which would seem to require the use of special educational and mental health service appeared to run at about one and one half times the normal rate. Finally the prevalence of neurotic traits likely to be amenable to traditional psychotherapeutic intervention, seemend to occur at about the same rate in this population as in the general population.

EVALUATION OF PERSONALITY CHANGE

A final question of interest is the determination of group personality shifts detected by the second test series and presumably attributed to the effects of the pre-school program. No control group was available but seems unlikely "practice effects" on a measure such as the CPT. It is of considerable interest that changes significant at the 5% level of confidence occurred on those CPT indices where high scores represent likely presence of psychopathology (purple, brown, gray, white and black). All these changes were in the direction of lower scores on the second test series. These findings, however, are restricted to the "pretty" condition and represent some evidence that the Headstart programs may have been instrumental in helping at least some of the children to adopt modes of affect and impulse control which are closer to the cultural norms. The only significant changes under the "ugly" condition were a higher black and a lowered red. Both instances, however, reflect, again movement in the direction of the normative means and consequently favorable change.

BIBLIOGRAPHY

- CATTELL, R.B.: Handbook for the Culture Fair Intelligence Test. Champaign, Illinois: Institute for Personality and Ability Testing, 1962.
- HEISS, R. and HILTMANN, H.: Der Farbpyramidentest nach Pfister. (The Color Pyramid Test according to Pfister). Bern: Huber, 1952.
- HOLLINGSHEAD, A.B. and REDLICH, F.C.: Social Class and Mental Illness: a Community Study. New York: Wiley, 1958.
- SCHAIK, K.W.: Die Validität des Farbpyramidentests. (The validity of the Color Pyramid Test). Diagnostica, 1962, 8, 141-182. (a)
- The performance of mentally defective children on the Color Pyramid Test. Journal of Projective Techniques, 1962, 26, 447-454. (b)
 - The Color Pyramid Test: a non-verbal technique for personality assessment. Psychological Bulletin, 1963, 60, 530-547.
 - On the relation of color and personality. Journal of Projective Techniques and Personality Assessment, 1966, 30, 512-524.
 - The 1965 Head Start Psychological Screening Program. Morgantown, W.Va.: West Virginia University, 1967.
 - Test Kit for the Color Pyramid Test. Bern and New York: Huber and Grune & Stratton, 1965.
- SCHAIK, K.W. and HEISS, R.: Color and Personality. Bern and New York: Huber and Grune & Stratton, 1964.

MIREILLE MONOD

De l'interprétation de la création projective dans le test de Rorschach, le test du Village et les tests thématiques chez l'enfant

Les quelques réflexions que nous présentons aujourd'hui ont été élaborées à la suite de discussions qui se sont déroulées dans le cadre du VI^e Congrès International du Rorschach et des Méthodes Projectives, en juillet 1965 à Paris.

Voici trois ans nous présentions un rapport sur "La valeur diagnostique et la valeur pronostique de la combinaison test de Rorschach et test du Village". Il nous apparaît à l'issue de ces trois années au cours desquelles nous avons précisé la méthodologie de décodage et d'interprétation du test du Village chez l'adulte comme chez l'enfant, qu'il est l'heure de poser les problèmes qu'implique l'interprétation des techniques projectives dans l'exercice de la psychologie clinique infantile.

Participant à l'enseignement de la psychologie à la Faculté des Lettres et Sciences Humaines de Paris il paraissait impossible, au lendemain du "mouvement étudiants" qui s'est développé durant le mois de mai 1968, de ne point faire allusion à la remise en cause de la psychologie clinique à laquelle nous avons assisté. La contestation parfois très violente des tests et de la position théorique et politique qu'elle implique porte essentiellement sur les techniques psychométriques. Il serait injuste de nier que la critique visant la psychologie psychométrique ou projective n'est pas fondée. Pour nous, il faut distinguer entre une méthode telle que le décodage du psychogramme servant de repaire à l'interprétation, d'une perspective qui transformerait la méthode en l'objet même de la connaissance d'autrui. Il nous apparaît que dans notre recherche concernant une unité méthodologique et nosologique de l'interprétation nous essayons de dépasser le niveau psychotechnique en proposant une position critique qui s'essaye à surmonter la multiplicité technique servant trop souvent d'alibi à une nonchalance de la pensée. La facilité que peut trouver le praticien dans la "technique projective recette" doit être surmontée par une réflexion visant à l'unité de la compréhension projective.

Après avoir précisé le sens que nous donnons aux termes "d'interprétation" et de "création projective", nous essayerons de cerner la place de notre propos par rapport à l'unité théorique d'une psychologie projective et dans la perspective génétique qu'implique tout problème psychologique touchant à l'enfant. Nous terminons