A PRACTICAL GUIDE TO THE
Thematic Apperception Test
The TAT in Clinical Practice
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A PRACTICAL GUIDE TO THE THEMATIC APPERCEPTION TEST
A PRACTICAL GUIDE TO THE THEMATIC APPERCEPTION TEST: The TAT in Clinical Practice

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To Drs. Lon Gieser and Wes Morgan—
two dedicated TAT historians.

To Christiana Morgan—an early TAT pioneer.
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INTRODUCTION

The purpose of the present text, as its name implies, is to provide the student with a short, manageable, but also reasonably comprehensive guide to the Thematic Apperception Test (TAT) and other apperceptive techniques.

As the present authors have stated elsewhere (Aronow, Reznikoff, & Moreland, 1994), the TAT, like the Rorschach, provides essentially idio­graphic rather than nomothetic information. Thus, it is quite effective in telling the clinician how the subject views the self and the world in his or her own unique way. It is less effective as a psychometric procedure, providing a nomothetic measure of traits. For this reason, we prefer the term technique when dealing with projective devices, reserving the term test for those instruments that are primarily nomothetic (e.g., Millon Adolescent Personality Inventory-2, MMPI-2). Rossini and Moretti (1997) have correspondingly remarked on the resulting tendency of TAT applications in clinical practice to abandon both any psychometric approach or scoring system.

The present text will cover both the well-known TAT and the Children’s Apperception Test (CAT), and will also foray into the somewhat lesser known cousins of these techniques that have come into the testing arena in recent years. Subject populations that will be considered include children, adolescents, and adults. Some scoring systems that have been put forward will be discussed but, as we will state, we do not view scoring systems for apperceptive techniques as time-effective. Their usefulness is, thus, principally limited to research on apperceptive techniques. This book will also give special attention to cross-cultural issues and the application of apperceptive techniques to minority populations.

The text is organized as follows: Chapter 1 will discuss the history of apperception techniques, with Chapter 2 devoted to test administration.
The third chapter will present test interpretation, including the use of the one-sentence summary technique that we find very helpful. Scoring systems will be briefly presented in the context of this chapter.

Chapter 4 will present data on the stimulus value of the TAT cards. The fifth chapter will succinctly describe research findings pertaining to apperceptive techniques, while Chapter 6 will deal with diversity issues and alternative apperceptive methods. The seventh chapter will cover the TAT and psychotherapy, while Chapter 8 will describe how apperceptive findings should be integrated in a psychological report. The final chapter, Chapter 9, will present sample protocols.
A History of Apperception Techniques

The prehistory of projective techniques goes back quite far, including works of the ancient Greeks on stimulus ambiguity, comments by Da Vinci on the artistic usefulness of discerning objects in the mud or the embers of a fire, and Shakespeare’s comments on “cloud interpretation.”

For instance, in the 15th century, Leonardo Da Vinci quoted Botticelli as stating that when a sponge full of various colors is thrown against a wall, a blot is produced in which figures of people, various animals, and so on, may be perceived. Da Vinci suggested the use of perceptions such as these for artistic inspiration (cited in Zubin, Eron, & Schumer, 1965). He stated:

Don’t take my advice lightly when I advise you, even though it may appear boring to stop and gaze at wall spots, or at the ashes in the fire, in the clouds, or in the mud and at similar things; you will, if you consider it carefully, discover in it many wonderful things. For the painter’s spirit is aroused to new things by it, be it in composition of battles, of animals and men, or in the various compositions of landscapes and of unusual things such as devils, and their like, which are calculated to bring you honor. Through the indescribable and indefinite things, the spirit becomes awakened to new discoveries. (Da Vinci, quoted in Zubin et al., 1965, p. 167)
Binet and Henri, the founders of modern intelligence testing, are usually given credit as the originators of the scientific approach to projective techniques, using inkblots in the study of visual imagination (Binet & Henri, 1896). Binet and Henri also used children’s reactions to pictures as measures of intellect.

The TAT was first developed by Murray and his coworkers at the Harvard Psychological Clinic, having first been described by Morgan and Murray (1935). The term apperception was chosen in view of the fact that subjects don’t just perceive, rather, they construct stories about the cards in accordance with their personality characteristics and their experiences (Anderson, 1999). As contrasted with the Rorschach, the TAT has usually been regarded as providing more structure to the subject. As Murray noted in the test manual, the original procedure required two one-hour sessions with 10 cards used in each session. Those cards used in the second session were chosen to be more unusual, with subjects asked to give free play to their imaginations.

There has been controversy about the early history of the TAT in that Christiana Morgan was, at the initial stages, given the first authorship on the TAT. The controversy was magnified because of the long, conflictual relationship between Morgan and Murray. Douglas (1993) has suggested that the downgrading of Christiana Morgan in the authorship of the TAT is an example of male chauvinism, though most current authors view Murray as the primary force behind the TAT (e.g., Morgan, 1995). There is general agreement that the idea for the TAT emerged from an in-class question asked by one of Murray’s undergraduate students. The student reported that her son, when ill, had spent the day making up stories about pictures in magazines. This mother wondered if pictures might be used in a clinical setting to release fantasy material (Douglas, 1993).

The TAT quickly became one of the most popular and sometimes the most popular projective technique in the clinician’s armamentarium. Obrut and Boliek (1986) describe thematic picture techniques as “the most widespread projective techniques used with children and adolescents” (p. 176). Similarly, Piotrowski and Keller (1984) found that clinical program directors most often cited the TAT as the projective test with which trained psychologists should be familiar. Lubin, Larsen, and Matarazzo (1984) and Watkins, Cambell, Nieberding, and Hallmark (1995) have likewise reported the instrument’s continuing popularity among projective techniques in a variety of situations and populations. The TAT and similar thematic instruments have been found to be frequently used for assessment in cross-cultural research (Retief, 1987). A good grounding in the interpretation of apperception techniques thus appears highly desirable.

The TAT appears to have received better acceptance in the scientific community than, for example, the Rorschach. It should also be noted that the
TAT is known for its nonclinical contributions as well, being an important technique used in various areas of personality research; as for example, McClelland’s works on the need for achievement (e.g., McClelland, 1958, 1961a, 1961b). These more strictly scientific applications of the TAT have probably facilitated its acceptance by research-oriented psychologists.

A number of other projective story techniques have been put forward subsequent to the TAT. These have included the CAT designed by Bellak (Bellak & Abrams, 1997); the CAT-H, using human figures for older children (Bellak & Hurvich, 1966); the Roberts Apperception Test for Children (RATC; McArthur & Roberts, 1982); the Blacky Pictures Test (Blum, 1950); the Make-A-Picture Story Test (MAPS; Shneidman, 1952); the School Apperception Method (SAM; Soloman & Starr, 1968); the Michigan Pictures Test Revised (MPTR; Hutt, 1980); the Gerontological Apperception Test (GAT; Wolk & Wolk, 1971); the Senior Apperception Technique (SAT; Bellak & Abrams); the Tell-Me-A-Story (TEMAS; Constantino, Malgady & Vazquez, 1981); and the Southern Mississippi TAT (SM-TAT; Ritzler, Sharkey, & Chudy, 1980).

In addition, the TAT itself has been adapted at times for certain special purposes by modifying the original set of pictures, such as in attitude surveys evaluating the attitudes toward issues such as labor problems and authority (e.g., Harrison, 1965). Another type of TAT modification involves the intensive measurement of a single characteristic such as sex or aggression. The studies by McClelland and his associates (mentioned earlier) on need for achievement (nAch), utilizing two of the TAT cards along with two other pictures, represent an especially impressive body of research.

Series D of the TAT has been in use for many years; previous Series A, B, and C were designed to be used by gluing pictures onto a cardboard background. Murstein (1963) has described the selection of cards for Series D, with cards being chosen on the basis of their contribution to establishing diagnoses for various clients.

Many people associated with the Harvard Psychological Clinic are reported to have contributed pictures, with artistic work being done by Christiana Morgan and Samuel Thal (Morgan, 1995). Morgan has also noted that the modifications of original images and earlier TAT representations were generally in the direction of removing detail and complexity and increasing ambiguity—thereby presumably increasing the likelihood of projection.

From its inception, the TAT has steadfastly remained a widely used test in clinical settings. It has spawned many variations having research and clinical applications. From the standpoint of both its historical antecedents and current usage, it is very likely that it will continue to be an important instrument in the area of personality assessment.