Understanding Multiple Personality with the Comprehensive Rorschach System

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Abstract: Exner’s Comprehensive Rorschach system is utilized in studying a unique sample of patients—three multiple personalities. Each patient and a number of secondary personalities are tested. Several interpretative and technical aspects of Exner’s system are clarified. All of the main personalities are ambivalent, extending Exner’s conclusions regarding the implications of this style. The secondary personalities have personality structures which are remarkably different from those of the main personalities. Differences from previous studies are attributed to unique administrative features of the Comprehensive system.

Multiple personality remains a rare, poorly understood, but genuine psychiatric disorder (Freedman & Kaplan, 1977). Published cases of Rorschach findings of multiple personality are also relatively rare (Wagner & Heise, 1974; Danesino, Daniels, & McLauglin, 1979; Wagner, Allison, & Wagner, 1983). Exner’s Comprehensive Rorschach System is a relatively recent Rorschach innovation with distinctive administrative procedures and several unique, empirically grounded interpretive guidelines (Exner, 1974, 1978; Exner & Weiner, 1982). The interpretive and technical limitations and assets of this system will become increasingly apparent as it is progressively refined and validated with an ever-expanding pool of case material.

Although Navran (1983) has offered some critiques of Exner’s system, there has been limited formal discussion regarding the impact of this specific procedure upon the nature of Rorschach data available for interpretation. An opportunity arose to see how a highly unusual sample of patients (multiple personality) would present on the Comprehensive system and to see whether these results would differ from previous reports. The following is a report and discussion of the structural features of the Rorschach material of three multiple personalities. Two of the personalities are adult and one is of an adolescent with a recently developing disorder.

Procedure

Patients were seen in the Psychiatry Department at the University of Texas Health Science Center at Dallas. Patients A and B were seen in outpatient psychotherapy, and patient C in an adolescent psychiatric unit. All patients met DSM-III criteria for multiple personality, and were evaluated for many sessions (by the second author) before the diagnosis was affirmed. For patients A and B, the alternate personalities were tested one week after testing of the main personality, and for patient C, all testing was carried out during the same session by the senior author.

G. L. prepared each patient for diagnostic testing by informing patients that the results would be used to further treatment planning. Based on the patient’s relationship with the secondary author, each patient was asked to have a predetermined secondary personality take the test, which was confirmed by G. L. subsequent to each patient’s being tested.

Each Rorschach protocol was scored according to Exner’s procedure by the senior author. Subsequent to this, a technician trained in Exner’s scoring procedure rescored each Rorschach protocol without knowledge of the nature of the study and without knowledge of the scoring of the senior author. Those responses in which a scoring difference occurred between the two scorers were
sent to a third scorer, who was also unaware of the nature of the study and who was asked to select that score considered most appropriate. The presented Rorschach scores are therefore a compilation of the judgments of three individuals trained in Exner's scoring procedure. The final two judges were completely blind as to the nature of the procedure.

Clinical Material

These three patients became aware of their difficulties because of extended periods of amnesia. They began to fabricate stories and explanations for themselves and others to come to terms with these disruptive episodes.

Patient A

Patient A is a 20-year-old white single female described as a model child until her senior year in high school. She then began disappearing from her home for long periods of time. Dramatic changes in personality were reported. She occasionally came home intoxicated and has engaged in a variety of suicide attempts. She has become uncommunicative and returns home with torn, disheveled clothing, unable to explain this in a consistent, coherent fashion.

The following three separate personalities, in addition to the main personality, were discovered.

a. A sexually promiscuous, aggressive person stating she was 16 years old who has engaged in a variety of antisocial activities. She has been a prostitute and has used a variety of drugs. She saw her main purpose in life as having fun, and seemed totally unconcerned with threats to her wellbeing.

b. A seven-year-old presents as an extremely shy, anxious child. She admits to various suicide attempts in the past, involving overdosing and the slashing of her wrists, for which the main personality has been blamed.

c. A very mature and dignified personality who is aware of the existence of the other personalities; she functions primarily as an observer of the other individuals.

Patient B

A 29-year-old woman with an extensive psychiatric history presented with auditory hallucinations; she hears voices telling her to behave in ways that are objectionable and confusing to her. She has in the past received various diagnoses, including schizophrenia. None of these diagnoses clarified for her or her family her longstanding history of rapid mood changes, impulsivity, black-out episodes, auditory hallucinations, drug abuse, and promiscuity. The following three personalities were discovered who in one way or another had provoked and caused objectionable behaviors of the main personality.

a. An extremely angry, temperamental individual. She is argumentative and aggressive with little concern regarding the impact she has upon others, and the possible consequences to herself.

b. A sexually promiscuous person who loves to dress up in expensive clothing, uses lots of makeup, and has lavish hair styles. Although promiscuous, she receives minimal enjoyment in physical contact with men, and has never had any emotional connection with any of them.

c. A calm, angelic-like personality, extraordinarily unrealistic and ill-equipped to deal with the world, but who relates with patience and “great understanding” concerning all the other personalities.

Patient C

A 16-year-old who has undergone a personality change in which she has become quieter, more withdrawn, inconsistent, and sometimes fantastic in the stories that she is beginning to tell. She has had progressive difficulties in attending school and seeks to leave because of a variety of excuses. She complains of becoming involved in situations without her complete knowledge of these episodes. She has increasingly been lying, stealing, and having several episodes of ending up in places with no knowledge of how she arrived there.

The following personalities were un-
covered subsequent to hypnosis.

a. A sexually promiscuous, argumentative person engaged in widespread drug abuse.

b. An extremely passive, compliant individual who was extremely well-behaved and "angelic" in her presentation.

Results

Table 1 presents major structural features of the Rorschachs of patients A, B, and C. All personalities are clearly ambivalent (M to sum C values in EB do not differ by more than 1 point). The EB/eb differences of patients A and B fall within Exner's Do range; i.e., the differences fall between +2.5 to -2.5 (Exner, 1983). Patient C, the teenager, with the recent onset multiple personality, has a EB/eb difference of 7, falling within Exner's D2 category (Exner, 1983).

Patients A and B have markedly elevated lambda scores (1.6), whereas Patient C has a markedly depressed lambda score (.58). Patients A and B emphasize color over form in their use of chromatic stimuli (FC : CF+C). Patient C has an age-appropriate relationship of form to color in chromatic responses. All patients have elevated animal percent. Patients A and B have markedly elevated number of paired responses.

All patients have adequately developed and currently intact reality operations. Patient B's lowered F+% stems from weak rather than minus responses. Patient C, however, is being pushed to her limits in terms of her capacity to maintain adequate reality testing. She has three minus responses, three special scores, and a Zd of -5 in a record of 19 responses.

Tables 2, 3, and 4 compare structural ratios for each patient with that of their alternate personalities. The most remarkable finding is the wide variability in numerous scoring categories. For each
and increasingly compromised.

The adult multiples experience limited anxiety and discomfort regarding their severe personality dysfunction (Do score), and resort to dissociative episodes rather than experience anxiety and discomfort when under psychological stress. The adolescent with the more recent onset disorder is subjectively aware of and disturbed by her impaired functioning. These findings with the adult multiples are consistent with the established clinical understanding of these patients. They are unaware of the nature and extent of their psychopathology, and it is only after extensive psychotherapy that they gradually become aware of their difficulties. The correspondence in this study between a Do status in patients with chronic psychopathology and their lack of insight provides additional support for Exner (1978) and Exner & Weiner's (1983) original conclusions regarding the meaning of this ratio, i.e., in patients with known or chronic psychopathology, a Do status is associated with a relative lack of discomfort concerning the psychopathological behavior.

All patients are impaired as regards their range of interest and the complexity of involvement with which they encounter internal or external stimulus demands. (All patients have depressed animal percent and elevated or depressed lambda). These patients (adults) seem to either have diminished energy with which to deal with activities in their world (A%, lambda, elevated 3r+(2)/R) or are unable to delimit and control the extent of their responsiveness (adolescent), and are driven to process more information than they can comfortably handle. The adolescent personality, Patient C, has severely overloaded reality and thinking operations (presence of elevated special scores and minus form level scores).

If these three cases are understood as cross-sectional views in the development of multiple personality, it appears that the development of more flagrant psychotic processes are avoided and a stable relationship to the world is brought about by the progressive utilization of

Discussion

How can we more effectively understand the personality structure of multiple personality through the Comprehensive Rorschach procedure? How might this unusual sample of patients clarify some of the characteristics of the Comprehensive system?

The ambient status of the Rorschach protocols of these three patients indicate they are persons who lack a clear and consistently employed style of coping with life's demands (Exner, 1978). Patients A and B have labile and poorly controlled affective responsiveness (FC: CF + C: elevated lambda). Patient C has significantly diminished stress capacity (D2), processes information in a slipshod and impulsive fashion (Zd-5), and is prone to behavioral lability (depressed lambda). Reality testing operations of Patient C are being significantly taxed

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| **for Major and Secondary Personalities**
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dissociation and multiple personality formation as a coping strategy. The agitation and impaired thinking of the adolescent multiple is absent in the more established and more comfortable adult multiple personalities.

The ambivalent status of these three patients extends Exner's (1978) original and innovative insight concerning personality limitations and characteristics of this type of structure. After reviewing his considerable research material, he concludes that,

Ambients are more pliable, less consistent under stress, more subject to change, and more unsure in problem-solving situations. The ambivalent is probably a vacillator; that is, one who tends to fluctuate between alternatives rather than manifest a firm style, regardless of whether that style is effective or ineffective. They are probably the more suggestible, versatile in the sense of being able to adopt a variety of styles, but less consistent or secure in the use of a style (p. 101).

This is a remarkable and cogent description of multiple personality in Rorschach terminology. In fact, multiple personality may be an extreme manifestation of an ambivalent orientation. Rather than develop consistently employed strategies for dealing with intrapsychic or external stress, these people shift and vacillate between totally different styles.

Exner has demonstrated in his learning studies (1978) that ambients have an impaired learning capacity because of their extreme vacillation. This concept may also be applied to the learning of personality traits. Because these patients dissociate and switch into totally unique modes of functioning, they are able to prevent overwhelming anxiety, and perhaps psychotic behaviors, from emerging. They remain intact, but highly shallow and superficial in their functioning.

Exner's studies (1978) also indicate a remarkable stability of structural variables for both patient and nonpatients for brief and extended time periods. Ambients proved to be the group of patients that were most unstable as regards ratios from the structural summary. In the current investigation, the dramatic shifts in these structural variables indicate there are indeed unique psychological conditions in which persons may undergo rapid and drastic reorganizations of personality structure — one of these being multiple personality embedded in an ambient style.

The obtained results are remarkably inconsistent with Wagner's (Wagner, Allison, & Wagner, 1983; Wagner & Heise, 1974) decision rules for diagnosing multiple personality. Two possible reasons exist for a lack of confirmation of the Wagner rules. It is possible that there is a large spectrum of patients utilizing dissociation as a defense who manifest multiple personality and that the current group is a unique sample and different from that of the previous studies reported. What is more likely is that the Comprehensive system is indeed a unique Rorschach procedure (Exner, 1974) and that the current results reflect differences between the administrative procedure of the Comprehensive system as opposed to that of the Piotrowski system employed in these previous studies. An examination of Exner's (1974) procedures clearly indicates that his system generates briefer records, there are fewer additional responses (Navran, 1983) and the inquiry is much more limited. Some of the differences between Wagner's data and the data obtained from the current study may be in part related to the demand characteristics of the different administrative systems. Piotrowski's method (Exner, 1967) encourages patients' productivity and elaboration of responses as compared to Exner's system, in which there is an emphasis on brief and delimited inquiry.

Clinical knowledge and the current Rorschach data concerning multiples suggest that these patients struggle and vacillate between overcontrol and undercontrol or constructive and destructive forces within their personality (Piotrowski, 1977). For example, comparisons of the main with the alternate personalities of all patients in Tables 2, 3, and 4 reveal a major deterioration of the...
control aspects of the personality (drop in $F^{+}\%$, drop in number of popular, unbalanced $Zd$, fluctuations in lambda). Apparently, these patients have not been able to integrate and master the less socialized and less acceptable behaviors within their main personality structure. Rather, they must dissociate and manifest their secondary personality systems in order to express these less acceptable behaviors. They vacillate between being highly constricted "well-behaved patients," to acting-out and indulging in rather reckless behaviors. The more concise Exner instructions and parsimonious inquiry may tend to favor the emergence of the overcontrolled aspects of the personality, whereas the more stimulating Piotrowski technique may encourage a greater elaboration of trends partially concealed from the Exner procedures.

The data obtained with this unique sample of patients extends Rorschach knowledge concerning the behavior of multiple personality. It also extends our understanding of the particular vulnerabilities of the ambivalent personality and suggests increasingly discussed limitations of the Exner inquiry. Navran (1983) described a paranoid schizophrenic in whom critical Rorschach data might have been overlooked when using the standard Exner procedures. The current study suggests that the less socialized aspects of multiple personality may emerge most clearly on the Rorschach with more stimulating Rorschach administration (Piotrowski) rather than the more restrictive Exner Rorschach administration.

References

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