

Recommendations Concerning Remote Administration of the Rorschach
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As most of the world is on lockdown, many psychological assessors rightly wonder if they should continue to engage in assessment and, if so, how best to carry on the assessment work that they used to complete in person. We do not have recommendations concerning who should continue to engage in assessment work, as local regulations, clinical need, and professional judgment will dictate that decision. However, mental health problems continue to need attention and clinicians are providing care. As such, there are situations when an assessment would be helpful or even necessary. These guidelines are for those assessors who are still practicing and responding to clinical needs and who are looking for help on how best to engage in assessment practice that may encompass use of the Rorschach task.

Currently, we are aware of two good sources of general guidance for remote assessment practice (please contact us if you know of others). With a team lead by Jordan Wright, Joni Mihura, Hadas Pade, and David McCord, the American Psychological Association (APA) prepared helpful [general principles for psychological tele-assessment during the COVID-19 crisis](#). APA also collaborated with a consortium of neuropsychology organizations to form the [Inter Organizational Practice Committee](#) (IOPC). The IOPC has prepared an assortment of resources for telehealth in general, and teleneuropsychology in particular. For the latter, the IOPC site includes all known data on the promising but limited research concerning the equivalence of in-person and remote neuropsychological assessment. The IOPC also provides guidance for billing and reimbursement in the U.S. Perhaps of most importance to these Rorschach recommendations, readers should consult the section titled “Concrete Strategies for Using a Teleneuropsychology Platform / Walk Through of a Virtual Visit” on their [Remote neuropsychology assessment models and tools page](#).

We urge all Rorschach assessors to be familiar with these resources, and to consider participating in training to learn telehealth basics. To facilitate the latter, APA is offering free access to their 8-hour training, [Telepsychology Best Practice 101 Series](#). With these resources as a foundation, we specifically address questions about Rorschach assessment. Is it possible to administer the Rorschach remotely? If so, how can an assessor do this optimally?

We believe the answer to the first question is, ‘Yes,’ and we describe five options in this document to answer the second question. This document is largely procedural, focusing on the steps and some of the issues that assessors need to consider with a modified form of administration. However, no assessment is simply procedural. Thus, we close the document with broader psychological considerations about completing assessments during this very unusual time.

The challenges for Rorschach assessment are greater than for most other assessment measures. Not only does the assessor need proper technical equipment and a reliable high-speed internet connection, but also the examiner needs to ensure the respondent has the same on the receiving end. This includes ensuring the inkblots are the right size for viewing (i.e., 9.5 x 6.75 inches, 24.13 x 17.145 centimeters), the right distance from the respondent (i.e., arm’s length and capable of being moved closer), capable of being turned, and rendered with the correct color hues and shading. Further, the assessor has to be able

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to see where the respondent is locating objects and features. Most of the literature on equivalence in teleneuropsychological assessment has relied on administering verbal measures. The challenges faced with Rorschach assessment are more akin to the challenges of administering a neuropsychological task requiring observation of the respondent's manipulation, such as Block Design or Grooved Pegboard. Researchers have yet to study measures like these via remote administration.

Non-Feasible Options

Given the challenges, we do not believe the assessor can administer the Rorschach by holding the cards up to their computer screen so the respondent can view them. Doing so provides no check on what the inkblots might look like to the respondent with respect to size, color, and shading, and provides no feasible way for the respondent to turn the card or for the assessor to see where the respondent is locating objects. For similar reasons, directing a respondent to the Wikipedia site displaying the inkblots is not an option. It also is not an option for the assessor to download the images from that site to send sequentially to a respondent who then views each card on their tablet or desktop. Most tablets, such as a standard iPad, are not large enough to accommodate the correct card size, and without calibration, it would be impossible for an assessor to ensure the respondent is viewing the proper colors and shading.

Direct Assessment of the Client

Another option is mailing the inkblots to the respondent with a carefully planned administration packet (i.e., cards stacked upside down in reverse order that the respondent can remove at the right time in that orientation). Following this, the respondent would be required to manage the administration steps usually enacted by the assessor (i.e., keeping the cards face down before viewing them in the RP, stacking them for reuse in the CP, ensuring seating that allows both the respondent and the assessor via webcam to see the cards) and then return the cards to the assessor. However, there are substantial downsides to this approach. It requires a reasonably well functioning respondent to manage the extra demands placed on their resources and self-discipline to complete the packaging and administration steps. In addition, it opens up the possibility of violations to test security (e.g., the respondent could scan or copy and distribute the inkblots), as well as practical constraints (e.g., most assessors have just one set of inkblots) and the potential for financial loss (e.g., if the inkblots are not returned).

Thus, this is likely not a viable option for most assessments. We say this option is not likely as opposed to impossible largely because the Rorschach stimuli, unlike almost all other assessment measures, are already available on Wikipedia. This makes test security less of an issue, as the concern shifts to security around scoring and interpretation rather than availability of the stimuli. With security of the images no longer a salient concern, an assessor considering this option needs to evaluate the respondent's capacity to manage the added demands of a remotely guided administration, as well as the assessor's ability to deliver the inkblots and ensure their return in a timeframe that works for their practice. The final concern then would be that the respondent might not return the inkblots. To ensure this is highly unlikely, the assessor should be confident they have established a positive working alliance before sending material and then provide a prepaid envelop for the respondent to use for their return. If the respondent still does not return the cards, the behavior most likely would reflect much larger and formerly unrecognized problems in the working alliance. The assessor would need to process this with the client and attempt to resolve the impasse. Of course, the assessor also would need to document this behavior in a report and fully consider its implications for understanding the client and the referral questions.

Assessment with a Facilitator: On-Site versus In-Room and Non-Resident versus Resident

At present, we believe the most feasible way to complete a Rorschach assessment is with the aid of an on-site facilitator. Researchers have used on-site facilitators in many of the studies examining the equivalence of teleneuropsychology with in-person assessments. Two distinctions are important. First, facilitators can be quasi-professionals working with the assessor (a non-resident) or they can be family members or co-habitants of the client (a resident). Either type of facilitator needs to be reasonably high functioning and given detailed instructions about their role prior to the assessment. Second, a critical distinction is between an on-site and an in-room facilitator. On-site facilitators help set up the administration area for the client and then leave the room while remaining on-site and on-call until they need to return to the administration room, either to intervene with or aid the client or to gather and return the assessment materials at the end. In-room facilitators perform all the same functions as the on-site facilitator but also remain in the room during the assessment.

Because they change the typical structure of an administration, assessors generally should only use an in-room facilitator when they need to be present to accomplish the assessment and there is no other viable alternative. An in-room facilitator would need to be capable of adhering to professional standards regarding confidentiality or they would need to be actively and explicitly involved as participant-observers in the assessment process. That is, an in-room facilitator either needs to be someone previously unknown to the client who will be experienced as a relatively neutral agent of the assessor (a non-resident) or someone known to the client whose presence in the room will almost surely influence the response process for the respondent (a resident).

Assessment with a Non-Resident Facilitator

On-Site. With home confinement enacted in so many parts of the world, we see two possible ways a remote assessment could work with an on-site quasi-professional, non-resident facilitator. Both are only feasible if the local government deems psychological practice to be an essential business and allows it to continue taking place while following appropriate social distancing guidelines. Under these conditions, the assessor may be able to enlist a local mental health technician to visit the respondent's home to assume the role of the on-site facilitator. Alternatively, the respondent could come to an inpatient or outpatient facility to meet with an on-site facilitator. If either scenario were possible in a region, the assessor would need to ensure the on-site facilitator has a set of inkblot cards. Once the on-site facilitator has the cards, the assessor could modify the [R-PAS social distancing guidelines](#) to accommodate both the assessor's need to view the respondent and the cards and the on-site facilitator's need to maintain social distance when organizing the administration area.

In-Room. If the non-resident facilitator needs to be present in-room during the assessment, relevant informed consent documents must clearly state this expectation. Procedurally, an in-room facilitator is necessary when the client is unable to manage the administration process on their own, either because they lack the technical skill to manage the electronic interface, because they have significant psychopathology, or because they are too young. A remote assessment under either of the latter two conditions likely will be quite challenging, particularly for those clients who are dysregulated. The in-room quasi-professional facilitator would need expertise in positive behavior management in order to support the respondent's participation in the process. In addition, the non-resident must maintain [social distance while in the room](#), which further complicates the assessment. The assessor and the facilitator need confidence in advance that the assessment could be successful with both of them at a distance

from the respondent. Obviously, if this expectation turns out to be wrong, the assessor can simply terminate the Rorschach component of the evaluation.

Assessment with a Resident Facilitator

On-Site. Procedurally, it is much simpler to coordinate and implement an on-site resident facilitator than a non-resident facilitator. The main challenge will be for the assessor to gain confidence in advance that the facilitator will follow-through with instructions. An optimal way of maximizing this outcome is to provide an agreement document listing the facilitator's responsibilities with an area for both the facilitator and the assessor to sign.

In-Room. Although it is easier to implement an on-site resident facilitator than a non-resident facilitator, the opposite is true for an in-room facilitator. An in-room resident facilitator becomes part of the assessment process and the assessor will need to be mindful of their relationship with the client and the likely impact of that relationship on the testing response process. The assessor will want to spend more time getting to know the facilitator, preparing them for their role, and soliciting questions from them; as well as more time with the client exploring their relationship with the facilitator and preparing them for the facilitator's presence in the assessment. Before beginning, the assessor will want to encourage the facilitator to remain neutral and avoid reacting to the cards or to the respondent's responses. The assessor also should instruct them to refrain from offering the respondent help to formulate their responses, providing tips on where to look or how to hold the card, or making other kinds of suggestions or comments that would interfere with the respondent's personal response. If these behaviors occur anyway, the assessor should intervene, note this, and take what transpired into account when formulating inferences. If the client is a child and the facilitator is a parent, a number of helpful articles are available from the [Therapeutic Assessment Institute](#) about how to involve parents in an assessment optimally. In particular, we recommend Tharinger et al. (2012), "Therapeutic Assessment with children: Intervening with parents 'behind the mirror.'"

Research on Forms of Modified Rorschach Administration

A research base does not yet exist for administering the Rorschach remotely. However, when evaluating its likely impact, assessors can consider available research concerning alternative methods of administration. One body of research has examined the more overt and structured administration guidelines used by R-PAS (Meyer, Viglione, Mihura, Erard, & Erdberg, 2011) relative to the Comprehensive System (Exner, 2003); in particular asking upfront for two or three responses per card and allowing no more than four responses to each card. Many users initially had concerns that this modified form of administration would influence normative values. However, the seven studies comparing each method show R-PAS administration has its intended effect of slightly increasing R and notably reducing its variability, and it does so without changing the norms for other variables (Hosseininasab et al., 2019; Meyer et al., 2020; Pianowski et al., 2019).

Other research has examined standard CS instructions versus detailed instructions, which included guidance to say everything that one sees on the card, without finding differences (Hartmann, 2001; Hartmann & Vanem, 2003). Blais et al. (1995) used a within subjects design to examine CS administration and Rapaport et al. (1968) administration, which consists of face-to-face seating and selective clarification at the end of each card, with the card out of sight. From four sets of scores (CS and Rapaport at Time 1 and CS and Rapaport at Time 2), three produced equivalent results. However, Rapaport administration at Time 1 produced less Color, Shading, and Blends than the other three sets of

scores. This is an order effect, not a method of administration effect, and it is unclear what would account for that pattern. Schwartz et al. (1990) studied deaf participants using a counterbalanced design to assess them once with communication via sign language and once with communication via written instructions and their written responses. They found one difference (FC higher in written communication) in 25 comparisons, which is consistent with chance expectations. In addition, their one-week test-retest results were similar to those of other researchers (Meyer & Archer, 2001).

Using R-PAS administration guidelines, two dissertations examined presentation of the inkblots by the traditional cards or by iPad display and neither found any differences (Logid, 2017; Whitehouse, 2019). Berry (2020) is still writing up a two-study R-PAS dissertation, though data collection is complete. One of his studies contrasted standard administration with administration while wearing pinhole goggles that permitted just a 2° field of view; the other examined hemispheric activation by wearing goggles that permitted viewing in either just the far-left or far-right visual field. The visual field study had no effect on hypothesized R-PAS scores or on a neuropsychological measure sensitive to lateralization effects. The pinhole study showed just one hypothesized effect on the Rorschach, which was a reduction of Synthesis responses when wearing the goggles, even though participants were markedly unable to copy the Rey or Taylor complex figures accurately.

Several studies have examined standard individual administration and group administration. For the latter, respondents viewed the inkblots on a screen at the front of a room and wrote their responses by hand in a booklet. Although one might reasonably expect notable differences, the findings have shown just some small differences in determinants or content, with results largely consistent across modes of administration (Bornstein et al., 1997; Harrower & Steiner, 1951; Shaffer et al., 1981). Although of less relevance, but perhaps still worth noting is the generalizability of normative scores across languages, cultures, recruitment strategies, and examiners (Meyer et al., 2007; Meyer et al., 2015).

The studies mentioned above do not directly speak to the equivalence of in-person and remote assessment. In addition, those studies have limitations; some have small sample sizes, some use scoring systems that are no longer common, some have few examiners, some lack replication attempts, and most only examine a subset of variables relevant to interpretation. Nonetheless, the composite of findings suggest the Rorschach task and scores derived from it are relatively robust to variations in administration procedures.

General Considerations

Whatever form of remote assessment the assessor uses will be novel methodologically relative to how assessors collected normative data. Thus, the examiner will need to document the procedures they followed and consider their likely impact on the results obtained. It also would be prudent to be more cautious and conservative when formulating inferences from the assessment results because of these procedural modifications.

In addition, it is essential for assessors to follow relevant guidelines regarding psychological assessment practice in their locale. Each of the options listed here may not be feasible in all countries or states.

With the possible exception of a quasi-professional facilitator, the assessor will need to mail the cards to the client or an on-site facilitator and have them returned. This most likely would require one- or two-day delivery each way, with a prepaid return envelope. The assessor should disinfect the cards before sending them and after receiving them back. In addition, the assessor should provide a visible seal for

each envelope. The assessor can then inform the client or facilitator that they will only break the seal applied by the assessor when it is time to do so during their live meeting together on video. In addition, after the assessment is complete, the assessor should watch the client or facilitator seal the inkblots in the return package and place the visible seal on it to ensure it is not re-opened before returning it. Finally, we recommend that the assessor include in the consent form when directly assessing a client, or in the written agreement when using a resident facilitator, instructions for the prompt return of the inkblot stimuli. Signed agreements will help ensure their return.

Ideally, the assessor should have two monitors in their workspace, one for viewing the client and one for typing the protocol. The assessor could make a single monitor work if they reduced the size of windows, or recorded the protocol longhand.

Both the assessor and respondent should have headphones and be in a quiet environment without visual or auditory distractions. In addition, both should have high speed and reliable internet connections, with a clear contingency plan for pausing the assessment and contacting each other should the video link be lost. The assessor also needs a reliable way to contact the facilitator if using one.

At its most basic, we recommend that the client or facilitator position the client's webcam, chair, and workspace so the assessor can see the card as the client holds it, as well as the client's gestures toward it. That is, the view should be as if the assessor was sitting to the side of and slightly behind the respondent. The client or facilitator should do so using a sheet of paper, not an inkblot.

A more complex and beneficial arrangement would position a second camera on a different device so the assessor also could see the client in profile and, if the client wanted, they could turn to see the assessor. The assessor and client could use their phones for this, particularly if a stand of some sort was available to hold the device securely. Even an old phone or tablet could work for this.

Although more complicated technologically, if needed, the assessor could consider sending a second USB webcam with the inkblots. The facilitator could position this to the side of the client, as suggested above, or the assessor could prepare and send the webcam as a head-mounted device that displays what the respondent is seeing. If available, the assessor could use a GoPro camera and head strap for this purpose.

Finally, regardless of what administration method is used, the assessor should practice all of the procedural steps on their own first. Subsequently, they would be wise to practice them with the facilitator and perhaps even the client before trying them live.

Psychological Considerations

These guidelines largely focus on procedural considerations. However, it is as important, or really even more important, for assessors to be mindful of how this pandemic is likely to influence the psychological assessment results themselves. Researchers did not obtain norms for R-PAS, or any other measure, during a pandemic. Thus, it is impossible to say what is normal, typical, or expected right now. However, it is an anxious, frightening, and worrisome time for everyone, which leads to heightened limbic arousal and potential limitations in executive functioning. It also is a time when illness, death, and loss are pervasive in the media and touching the personal lives of many people, such that sadness and depression naturally may be elevated. Further, people are losing their jobs in record numbers and they have had to alter their behavior, daily routines, and living arrangements radically. This leaves people

appropriately focused on fulfilling the physiological and safety needs that fall at the lower levels on Maslow's hierarchy. Thus, in the context of a multimethod assessment (e.g., Hopwood & Bornstein, 2014) encompassing historical and current functioning, assessors should take care to avoid the fundamental attribution error of concluding that findings indicate trait-like qualities when instead they may be state-like responses to these highly unusual circumstances.

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