CHAPTER - III
RATIONALE OF THE STUDY

This section presents the rationale of the study and its major objectives that guided selection of the tasks and finally formulation of the major hypotheses related to this piece of research work.

Rationale

Reality sometimes poses life stresses that become too difficult for people to be conquered / surmountable. In face of such life stresses everyone generally navigates from land of reality to the island of fantasy, but psychotics generally remain in that island for a longer duration, normals for a brief period and neurotics for a moderate period. Psychodynamic school of thought assures the potential proposition that psychotics often dwell upon the island of fantasy, far away from reality. The experiences – drives, impulses, desires, needs, percepts, conflicts, frustrations are reserved in the reservoir of unconscious state that is very proximal to fantasy. The experiences (cognition, affect, perception, behaviours)
are distorted and the distorted experiences along with psychic energy "libido / mortido" are symbolically directed to soma and even psychological functioning / process, what we call as functional symptoms. Distortion of experiences of unconsciousness by modes of symbolism is not understood in its naked form nor are these driven out from the depth of unconscious. These experiences are generally springing out to the outer world through the road of creativity pursuit of man like art, literature, sculpture and innovative and scientific investigations and creations. Freud acknowledges this process of channelization of unconscious contents and terms these as mechanism of projection. The regulation of this process is governed by ego (a major component of personality) for psychical survival in the reality.

In backdrop of this school of thought, Hermann Rorschach (1921) developed "Ink blot" test for unearthing unconscious experiences as 'Test plates' could serve as stimulus for vibration of projective mechanism. The projective technique claimed that subject's responses to test materials were symbolical expression of their unconscious experiences. It was widely accepted and popularly used for understanding psychodynamics and for therapeutic purpose. But Exner (1989) reviewing studies on Rorschach test viewed that the test as projective tool used to unearth contents which had some significance. According to him, only about twenty percent of
responses involved projecting on to stimulus properties of the inkblots. Secondly, potential propositions derived from the rigorous, well-designed experimental studies concluded that perception of stimulus in its proper form was not recorded rather it was distorted, specifically the somatic problems. Somatic problems were symbolically represented in the consciousness. Psychodynamic school took account of only unconscious contents but not distorted / symbolical images of consciousness. Thirdly, neurological studies presently evidenced the findings that experiential knowledge were found to be stored up in cingulate gyrus, in occipital cortex in form of images (Mukundan, 2006). Experiential knowledge used to include both perceptual experiences (conscious experiences) often coloured by cingulate gyrus and subliminal perceptual experiences (might be called as subconscious ones) stored up in hippocampus. Conscious somatic experiences (somatic problems, the inner cry) were with high probability, not properly tapped by Rorschach test. The disturbances in the body image of women with hirsutism (Hollender and Cassell, 1965), body image distortion of arthritis patients with inkblots (Fisher and Cleveland, 1968) led to examine the Rorschach index with reference to “penetration score”. Cassell (1965) evidenced a relationship between Rorschach Anatomy and somatic symptoms. This scientific journey in the field of psychodynamic school of thought (unconscious process), neurological view on subliminal perception and body imagery (consciousness)
evidence on Rorschach test triggered the idea to develop a new inkblot test, which might be matching more to needs of the time. In this background Cassell (1980) developed an inkblot series to investigate somatic images more related to inner cry of the people.

Inner cry (body images) of schizophrenia and affective disorders, till date, were not systematically carried on; although a large number of studies were accumulated in the field of Rorschach test and the defined disorders. An understanding of inner cry (the resultant outcome of somatic problems, represented by means of symbols) of schizophrenia and affective disorders was thought to be an aid for understanding dynamics of the disorder, personality of the client and an additional tool for diagnosis of the disorder. With this objective in mind, the present study was undertaken. The study specifically would aim at having a comparative study on affective disorder and schizophrenia on SIS – I and Rorschach Psychodiagnostik. It would basically study reality orientation of schizophrenics and affective disorders. Ego-strength would operationally be defined as reality orientation as people with high ego-strength are often highly reality oriented, having inner-conflict management ability and reality matched acquisition potentiality.
OBJECTIVES

The present study basically would aim at investigating ego-strength of normals, schizophrenics and affective disorders. Ego strength would be measured by Rorschach in terms of Total number of responses (R), Location – Whole responses (W), Rare detail (Dd), White Space (S); Determinants – Good Form (F+), Human Movement (M); Content – Anatomy (An) ; and Popularity (P); and by SIS – I in terms of Total number of responses (R), Movement responses (M), Most Typical responses (MT), Typical responses (T) and Atypical responses (AT).

Major Hypotheses

1. The study specifically formulates the following potential hypotheses to be investigated in connection with Rorschach test:

   A. The normals would be having higher ego-strength as compared to clinical population – schizophrenics, manics and depressives.

      i. R would be higher in normals than the clinical populations.

      ii. W responses would be less in normals compared to the clinical population.

      iii. Dd responses would be lower in normals as compared to the clinical population.

      iv. S responses would be lower in normals as compared to the clinical population.
B. i. Higher F+% would be indicated in normals compared to the clinical population.

ii. M responses would be higher in normals compared to the clinical population

C. An responses would be lower in normals but significantly higher in the clinical population.

D. An elevated P response would be evidenced in normal as compared to the clinical population.

2. The study examines the following propositions in relation to SIS – I as a measure of ego-strength:

   i. An elevated R would be found in normals as compared to the clinical population.

   ii. M responses would be found to be higher in normals as compared to the clinical population.

   iii. An increased MT response would be hypothesized in normals as compared to the clinical population.

   iv. An augmented T response would be found in normals as compared to the clinical population.

   v. A lower AT responses would be hypothesized in normals as compared to the clinical population.

3. In respect of evaluating ego-strength of normals and the clinical population – schizophrenia, mania and depression, there would be statistically significant correlation between Rorschach variables and SIS – I indices.