Using projective Techniques in the Evaluation of Groups for Children of Rehabilitating Drug Addicts

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Introduction

Evaluators and researchers often have to deal with situations in which conventional research tools are impossible to use, because of either the characteristics of a population or unclear research variables.

In this paper, I will present a technique that succeeds in overcoming this kind of problem—a projective technique, but one that is different in the way it is applied to evaluation than the usual approach to projective techniques. There are two main differences: first, rather than focusing on the individual subject, this approach focuses on the phenomenon that goes beyond individuals; second, unlike conventional scoring approaches that use a highly standardized "key" to increase reliability (and subsequently ask, "Does it, or does it not, exist?"), the approach presented here is a hermeneutic one that assumes an interpretive process.

I will begin by discussing projective techniques and their application in both psychology and psychiatry, where they are used for assessing personality and diagnosing personality disorders. Then, using an example, I will present the process of working with projective techniques and conclude with a discussion of the example and its implications.

Projective Techniques

In psychology, projective techniques are used for inquiry and diagnosis, using vague or meaningless stimuli (such as inkblots) to elicit responses that are likely to reveal hidden personality strata in a subject through the projection of inner content onto the external stimulus. The various stimuli used in projective techniques are intentionally vague and open to different interpretations, in the expectation that the subject will give meaning to the stimuli, meaning that emerges from internal personality processes, and thus enable observation of these processes. Various experts believe that the greater freedom subjects have to choose their responses, the more their responses will be charged with meaning for them, since they can "supplement" what the stimulus lacks and accord it meaning solely by means of their own internal content. Thus, there are no "right" or "wrong" responses to the

stimuli, but whether the responses are normative or non-normative is of great importance. The normativeness of the responses is an empirical and statistically question.

Projective techniques have a long history in psychology—150 years—since a researcher named Krener discovered that different people respond differently to inkblots, but the application of projective techniques in clinical psychology really began in the early 20th century. Some seventy years after Krener, in 1921, Rorschach published his *Psychodiagnostik* and the test that bears his name. Additional tools have been developed since then, most prominent among them the Word Association Test, the Sentence Completion Test, the Thematic Apperception Test (TAT) (in which stories are told by a subject about each of a series of pictures), and the House-Tree-Person Drawing Test.

The rationale for projective techniques is grounded in Freudian theory and asserts that profound perceptions that are frequently subconscious, non-verbal in content, and latent motivations for action cannot be directly observed and are not reported by subjects, either because they are unaware of them or because they cannot be verbalized, being too abstract and inaccessible, threatening, embarrassing, or denied. However, they are relatively easily projected onto neutral stimuli or a third person, or actively manifest themselves in a variety of artistic activities. Their strength lies in the fact that they enable researchers to penetrate to the roots of issues that go beyond manifest cognition or the rational explanations provided by subjects regarding their desires, emotions, or behavior. (Dosajh, 1996; Frank, 1948; Garb, 1998; Gleser & Stein, 1999; Lahad, 1997; Sundberg, 1977).

Projective techniques possess several clear advantages: they do not require subjects to have any reading ability or a particularly high level of articulation (compared to other personality tests), their results are very difficult to falsify, and they enable a wide variety of assumptions and a broad and comprehensive view of the subject's personality.

Following a period of decline in the application of projective techniques in the 1960s, they have experienced a come-back and are now used extensively (Catterall & Ibbotson, 2000; Piotrowski, Keller & Ogawa, 1993), and are even computer aided (Bellack, 1992).

Projective techniques are typically divided into five groups (Linzey, 1959):

- 1. <u>Associative</u> techniques in which a particular stimulus is used to elicit the first thing that occurs in the subject's mind.
- 2. <u>Completion</u> techniques in which the subject is required to complete sentences or drawings (sentence completion or captions in comic-strip callouts).

- 3. <u>Constructive</u> techniques in which the subject is required to create a drawing, sculpture, or story.
- 4. <u>Choice/ordering</u> techniques in which the subject is required to choose from a group, or to order a group (of pictures, sentences, etc.).
- 5. Expressive techniques in which the subject is required to organize and incorporate a particular stimulus into a self-expressive process, such as role playing, psychodrama, dance, etc. In my view, some of the narrative interviews commonly used in qualitative research nowadays also fall into this category.

Projective techniques are widely used (Piotrowski, Keller & Ogawa, 1993) despite the difficulty of deciphering the responses in different cultures (Church, 2001). They are primarily used in the field of classic psychology in the evaluation of personality and personality disorders, ego forces, problems resulting from illness, assault, and trauma; in therapeutic processes; and for broader evaluation of normative populations (Amin, Foa & Coles, 1998; Daubney & Wagner, 1980; Hodges & Steele, 2000; Murray, *et al.*, 1999; Poster, 1989; Waiswol, 1995). Projective techniques are generally used in one-on-one settings or small groups. However, in some cases the techniques, especially completion (sentences or callouts) or ordering techniques, are also used in comprehensive research processes in conjunction with other research methods, especially as part of a questionnaire. This is particularly common in the education system (Oppenheim, 1992).

Since projective techniques are used in psychology and psychiatry for the diagnosis of individuals and groups, their application requires formal training: first, training in psychology and, second, practicing the techniques themselves under supervision. Some of the techniques, the Rorschach Inkblot Test and the TAT, for example, require advanced, specialized training (Anastasi, 1988).

Despite their wide prevalence and extensive application in psychology and other fields, projective techniques are highly controversial, which is not so much about the psychological rationale behind the techniques as it is about their reliability. Since the techniques are characterized by a high degree of openness, they are difficult to compare and retest. Therefore, from the beginning, and in order to overcome the variety of possible interpretations, very rigid coding and scoring processes were developed, according to which each response or response type has a single meaning, which is counted and rendered into a score that usually signifies a statement about the subject's mental state or personality traits. Although no significance is accorded to the correctness of responses in projective techniques, and since they are used in diagnosis, the normativeness of responses is most

important. Indeed, the coding and scoring is done according to accepted norms that have been empirically tested in different populations, usually through a process of identifying a connection between different types of responses and different types of personalities or problems.

In principle, this rigid coding and scoring poses a problem in non-mainstream populations (Church, 2001), which is exacerbated when dealing with comparative processes. The main concern pertains to three types of bias:

- 1. Construct bias (in this instance, an internal personality construct that cannot be directly observed), which occurs when the tested construct or its external representations vary from one culture to another or from one population group to another.
- 2. Method bias, which is divided into three types: sample bias, when, due to variance in sociocultural constructs, the samples selected are non-comparable or non-parallel; tool bias, which occurs as a result of different response patterns in different populations, to which the coding is, of course, not sensitive; and application bias, which occurs as a result of various communication problems between researcher and subject.
- Differential item functioning, which occurs due to inappropriate translation of items (of both stimuli and responses) whose cultural relevance is different, and of course, the different interpretation of items in different population groups (Dana, 2000; Van de Vijver & Tanzer, 1997).

However, even with mainstream populations, there is a heated debate over the statistical dependability of the tools, especially in terms of their statistical validity and reliability, their predictive capabilities, and their correlation with other personality tests and evaluation methods. It usually transpires that their statistical stability is weak in most cases and very controversial as well (Dana, 1995; Garb, Florio & Grove, 1998; Hiler & Nesvig, 1965; Hiller, *et al.*, 1999; Lilienfeld, 1999; Lilienfeld, Wood & Garb, 2000; Parker, Hanson & Hunsley, 1988).

As previously stated, all these scholarly arguments have neither reduced the extensive use of projective techniques, nor even their application beyond the fields of psychology and psychiatry, in such areas as marketing and advertising, where the techniques are used to identify people's tastes, beliefs and motivations, and the factors influencing consumer behavior. Advertisers have employed projective techniques to reveal consumers' responses to new or potential products and to characters and statements in their advertisements (Kumar, Aaker & Day, 1999; Livingston, 2003; Zikmund, 1997).

Here, I propose an application of projective techniques in program and project evaluation processes, different from their conventional application in processes of psychological diagnosis. In my view, this application benefits from the strong points of these techniques and counters a large proportion of the problems that arise in conventional usage (which in its turn, creates problems of its own). I will present this application with an example demonstrating the process.

Demonstration of the Application of Projective Techniques Background

The task facing the evaluation team¹ was the evaluation of a national project under the Israeli Ministry of Social Affairs, the National Insurance Institute of Israel, and JDC-Israel, the objective of which was to form support groups for children of parents who were undergoing drug rehabilitation. One of the most important evaluation questions was whether the program indeed provides support for the children and enables them to contend with the harsh reality in which they live. This was a very difficult question to appraise for several reasons, the main one being the population we were required to examine.

Children who grow up in families of drug addicts suffer from varying degrees of physical and mental neglect. They live in an unstable environment and are frequently required to exchange roles with the addicted parent or function as a co-parent. Consequently, they suffer from severe behavioral problems, on the one hand, and, on the other, from introversion and distrust of adults in general, and institutional systems in particular. Years of living with a "secret" makes them suspicious and difficult to interact with (Cloninger, Sigvardsson & Bohman, 1988; Kumpfer & Alvarado, 1995; Moos & Moos, 1984; Roosa, *et al.*, 1990).

The children who participated in the program were no different in any way from other children of drug-addicted parents, but they did have additional characteristics. First, the rehabilitation process itself intensifies the instability in the family, and second, the rehabilitating parents require so many of their resources for themselves that the little that had previously been available for the child vanishes. Another factor is associated with the structure of the program: the children were aged between six and 12 and came from different sectors of the population (urban, rural, Jewish, Moslem).

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¹ The evaluation process was funded by the National Insurance Institute of Israel, the unit for demonstrating projects. For details of the program and the full evaluation process, see Bar-On, Levin-Rozalis, & Yodelevictz (2000).

When we came to evaluate the efficacy of the program, we were faced with three main difficulties:

- 1. A population that is very difficult to study under any circumstances:
 - Children of drug-addicted parents who are suspicious, secretive, and have behavioral and communication problems;
 - Children who are, for the most part, very young;
 - A very diverse population in terms of age and demographic background.
- 2. Since the program was experimental and explorative, there were no clearly defined research questions and, consequently, no clear variables to observe. There was a desire to "strengthen" the children but with what, how, or in which characteristics or personality dimensions was unclear. In fact, the function of the evaluation was to expose these variables.
- 3. We had reasonable concerns that even if the program led to change in the children, the change would be slight and very difficult to trace.

The rationale for our choice

In view of all this, it was evident to us that ordinary interviews, whether open or closed, would not be an appropriate tool, and we decided to choose a technique that was less direct and less threatening, one that would be more likely to reveal content that is not openly accessible to children, for all the reasons detailed above. This tool was projective techniques; however, our application of projective techniques was different from their conventional application. We did not focus on individuals but, rather, on a phenomenon as it is manifested in a group. Whereas, in the traditional application of projective techniques there is strict and rigid adherence to structured methods of scoring and analysis, we chose an interpretative hermeneutic process, following Gadamer (2004; and Schwandt, 1994).

Methodology

At the beginning of the year we conducted interviews with 47 children belonging to eight different groups, and at the end of the year, after the intervention had occurred, we interviewed 28 children (belonging to six out of the original eight groups). As expected, the numbers at the end of the year had decreased because of logistical problems.

The interview was open, voluntary, and anonymous, and included two, very broad, open questions:

- Tell me a story about a group of children....
- Tell me a story about a family....

These questions are used as a projective screen, to get the children's complex perceptions of what a family or a group can be like. It is important to emphasize that the question asks

about <u>a</u> family and not about "your family" or any other specific family. The same is true for the group question. As described above, it was quite clear to us that such direct questions would be futile. The questions are not context related, but they are close enough to our evaluation question to reveal changes that occurred due to the intervention.

There were several interviewers. No records were kept that could connect a story to a specific child.

Processing the data

The process of interpretation was a hermeneutic interpretive one. We used the answers to both questions as a new text calling for fresh reading (Gadamer, 2004).

At the first stage, four evaluators read the stories separately, looking for characteristics that cut across the stories. Then we all met and, after a discussion, came up with three broad characteristics:

- The quality of the story its complexity, the richness of events, number and depth of characters;
- Content characteristics Who are the characters, what happened to them;
- The nature of events the kinds of feelings that emerge, how active the characters are, the quality of interactions, and so on.

No categories were developed at this stage of analysis.

At the second stage, the four evaluators separately came up with specific categories (which are listed below). Once again, we met and compared our work. At the third stage, after our discussions, we each continued the analysis separately. Then we met again and discussed the parts of the stories that we didn't agree upon. In a few cases, where disagreements were unbridgeable, we threw out the story.

At the fourth stage, we compared the stories from the two sets of interviews: before (pre) and after (post) the intervention.

Partial Findings

It is important to note that the evaluation of the program dealt with many questions that are not of concern here, such as interorganizational relationships, organizational learning, the qualifications of the group leaders, the processes of work, and so on. As an illustration of the kind of information one can gain from using projective techniques, I am including partial findings concerning children who participated in "groups for children of rehabilitating drug users" (table 1). This information is derived from the interviews only.

<u>Table 1: Changes in Children's Descriptions of Group Processes, Comparing the Pre-</u> and Post-Intervention Interviews

The issue*	Pre	Post
Involvement with limits and norms [We set rules as]	21.3%	3.6%
Emotional expression [It's fun to know; I'll miss; everyone	40.4%	67.8%
feels what I feel]		
Cognitive expression [I thought I was the only one who]	4.3%	14.3%
A feeling of legitimacy and security [only here I let my	23.4%	46.4%
anger out; I feel secure; here you can tell secrets]		
Active participation in talks [I talk of what is hard]	19.1%	32.1%
Involvement with feelings [It's fun to talk about feelings;	36.2%	57.1%
we talk about how we felt and how we feel]		
Addressing drugs [We talked about drug addicts; we are	12.7%	17.8%
here because each of us has a parent who used drugs]		

Note: Percentages do not add up to 100 because these are selected findings collected from several different tables.

Quotes from the interviews are included between square brackets.

At a glance, we can see that there have been changes in the number of responses in these areas, which shows noticeable growth in all aspects of expression, which is quite impressive in some cases. The only issue where there was a decrease is in norms and limitations. It is also worth mentioning that even though asked to tell a story about <u>a</u> group, most children described the group they were part of.

This was totally different from the stories about a family. Here are some examples. Two are from the beginning of the group process and two are from the end.

pre 1:

Once there was a large family of bears in a cramped house. They had a lot of honey and the foxes bothered them all the time. Thus they moved to the second forest, but more foxes came to bully them. The family said, "We better ignore them." And then they continued living there and didn't pay attention to the foxes.

pre 2:

There was a family that was destroyed because every day one member of the family died. Only one kid survived. He went to a foster family and he lived happily ever after.

^{*}The issues were raised spontaneously by the children during the interviews.

post 1:

There was a family that lived near the forest where there was a wolf lurking for prey. One day the little girl went out and the wolf devoured her. The father went out to help her and it ate him, too, and the mother.... One after another they died.

post 2:

There was a family that went for a walk and they got lost and it was dark and they saw an animal and cried and cried for help...

If we read the first story carefully, we can see that the story is an imaginary one, like a fairytale, with characters that are not human. Even though there are some troubles, the overall atmosphere is a good one and it is finished with a happy ending.

There is also a happy ending in the second story: the child lived happily ever after. The phrasing of the happy ending is from fairytales. The theme of the story, however, presents a very difficult situation, as is the case for all four stories presented here.

The happy endings disappear when we come to the post-intervention stories. The families are human, real, and vulnerable.

In analyzing the stories, we found several dimensions that we believe are important for understanding the internal world of these children:

- <u>Imagined real</u>: In a "real" story we have components of reality that are very likely to come from the child's world (television, foster family). In an imaginary story, we have components that are probably imagined (living in a forest, when there are no forests in Israel; the whole family dying).
- <u>Fairytale-like human</u>: The kinds of characters portrayed: whether they are witches, fairies, animals, and so on, or human, although a story with human characters can also be imaginary, as in the second post-intervention story.
- The child in the story: Whether the child does not exist or is passive/active.
- <u>Emotions in story</u>: Whether emotions exist and whether they are positive or negative.
- The object of interaction in the story: With whom do the interactions take place?
- <u>Characterization of the interaction</u>: Is it positive or negative?
- Coping and problem-solving in the story: Is it successful or unsuccessful?
- <u>Direction of the story:</u> Is it optimistic or pessimistic?

It is very important to state again that these characteristics are derived from the specific stories we had in hand. We didn't set them in advance. With a different population, different stories would probably bring up different characteristics (see, for example, Levin-Rozalis,

2004; Levin-Rozalis and Shafran, 2003). This is a crucial part of using projective techniques as an interpretive tool: to build the whole process from the bottom up, i.e., stage by stage from the raw data to the final conclusions.

The distribution of characteristics, comparing the pre- and the post-intervention stories, are given in table 2.

<u>Table 2: Selected Findings from the Distribution of Answers to the Request "Tell Me a Story about a Family..."</u>

Characterization	pre	post
Imaginary (a forest, witches) versus real	l	
Imaginary	55.3%	35.7%
Combination of imaginary and real	23.4%	25%
Real	21.3%	39.3%
Fairytale-like (fairytale images or animals) versus h	numan	
Fairytale-like	12.7%	21.4%
Combined	74.4%	3.6%
Human	12.9%	75%
Presence of drugs in the story		
Present	12.1%	14.2%
Not present	87.9%	85.7%
Presence of the child in the story	<u>.</u>	
Present and active	32%	18%
Present but passive	36%	46%
Not present	32%	36%
Amount and kind of feelings in the story	Pre	post
There is emotional expression	27.6%	14.2%
Positive feelings	12.8%	17.8%
Negative feelings	17%	28.5%
Mixed or unclear	70.2%	53.7%
The object of interaction in the story		
Parents, siblings, family	61.7%	82%
Other human images	53.1%	39.4%
Characterization of the interaction		
Positive	19.2%	21.45
Negative	61.7%	25%
Mixed	19.1%	53.6%

Coping and problem-solving in the story		
Successful	57.4%	46.4%
Unsuccessful	25.5%	28.5%
Direction of the story		
Optimistic	46.8%	35.7%
Pessimistic	12.8%	28.5%
Complexity of the story	<u> </u>	
Low	25.5%	21.3%
Medium	42.5%	32.1%
High	32%	46.6%

Note: Percentage don't add up to 100 because these are selected findings collected from several different tables.

As a whole, the picture seems much bleaker. Reflecting on all the parameters we used in analyzing the stories, we see a stronger tendency towards (non-encouraging) reality and less escape to fantasy. We could say with a fair amount of confidence that the children appear to deal a lot better with a harsh reality, escape less, and fantasize less. In addition to this higher awareness of reality, the stories at the end of the process were richer and more complex, with higher levels of verbalization.

It seems that the main process the children had passed through was a deepening of consciousness as a whole, particularly in relation to the complexity in their family's difficulties and relationships. That is evident in several parameters: there is an increase in pessimistic feelings and a decrease in optimistic ones—the children in the stories are much more passive and helpless, and their coping strategies are much less successful.

Discussion

There are several issues concerning the use of projective techniques in a hermeneutic interpretive way that need to be to discussed:

- 1. the power of using projective techniques, and the problems;
- 2. some ethical questions;
- 3. the program and its results.

Projective techniques have long been used in the field of psychology to investigate feelings, opinions, and motivations for action. They enable researchers to delve beyond people's surface cognition or rational explanations of their attitudes or behavior. They provide a qualitative research tool that minimizes researcher bias and offers useful insights into people's perceptions.

As discussed above, projective techniques are especially useful for investigating topics that people cannot talk about honestly for one reason or another. The most common approach to projective techniques is as a tool for diagnosing the condition of the person being examined. And in analyzing projective techniques, highly standardized methods and well-structured systems of administration, scoring, and interpretation are generally used.

As opposed to the restrictive analysis usually used in projective techniques, our method is hermeneutic; it assumes relationships between the text (answers given by subjects), the reader (evaluator), and reality (the examined phenomenon). In our approach, the focus is not on an individual but on a phenomenon. In the case presented here, we were looking for changes that occurred in the coping abilities of children of rehabilitating drug addicts. This has two sides to it. While we could say quite clearly that as a group, beyond the differences in age and background, highly detectable changes took place, we couldn't say anything about any individual child (and I'll come to this point again later). Taking into account that our evaluation subject is the program and not the individual child, we didn't see that as a deficiency but rather as a benefit.

By using the projective technique as a hermeneutic interpretive tool, we managed to overcome many of the disadvantages discussed in the introduction to this paper, such as unreliable results when dealing with non-mainstream populations, as our research population is. The hermeneutic approach begins with the reading of a specific text and does not rely on standardized coding, which has pretensions of being universal.

By bypassing barriers of language, differences in the ability to articulate, and in consciousness and awareness, projective techniques are a powerful tool for revealing information that is inaccessible in other ways. As a diagnostic tool, as conventionally used, projective techniques can only answer questions of "yes" or "no" – whether a symptom exists or not. As a hermeneutic tool, it is exploratory and enables us to openly discover processes and structures that we hadn't thought about in advance, which raises two very important questions: a methodological one and an ethical one. The main methodological problem is the reliability of results (Lather, 1993; Levin-Rozalis, 2003; Schwandt, 2001). The main ethical problem is the manipulation of the population. I'll try to answer them both and will begin with the easiest one – the question of reliability of results. How can we know that we have discovered everything there is to discover? How can we be sure that what we found is really what exists and not what we wanted or expected to find? Can we really claim that a different group of researchers will see the same things? Or that they will arrive at the same conclusions?

Well, we cannot be sure of either of these. In research, we never prove anything – we just do our best to corroborate our assumptions. The process of reading the texts, separately and together, and again separately, and again together, increases the chances for many points of view to arise. We can increase the probability of obtaining more perspectives on the phenomenon by creating

as diverse a group of readers as possible. Coming together after reading the text and having the opportunity for everyone to listen to each other – and by doing so, to gain a broader range of possibilities – also opens up the possibility of more interpretations. The researchers' approach is very important as well. Researchers have to be open to different points of view and should not try to convince the others to change their own points of view. It has to be understood that the purpose is to open up as many possibilities as possible. The chances are that the most important things will come out in the course of such a process.

After opening the maximum possibilities at the first stages of reading, the readers go through the process of actually judging reliability at the last stage. This last stage, which involves judging the meanings of the stories according to the categories that have been developed, can be done by a different group of researches to increase reliability. In the case presented here, the picture that we got at the end of the analysis was coherent and congruent with other findings (for example: the children's behavior as observed in the group meetings, interviews with parents and group leaders). We could make a very strong claim for the truthfulness of our findings (Campbell 1986; Lincoln and Guba, 1985).

The ethical question, in my view, is a serious one. The discussion on ethics in research is very complicated (Blumer, 1982; Howe and Dougherty, 1993; Howe and Moses, 1999; May, 1980). The strength of projective techniques lies in their ability to bypass all kinds of barriers, but in doing so, they reveal to the researcher information that the subjects didn't intend to give. Using these techniques, we actually manipulate the subjects for our own purposes as researchers. The subjects are directed in one direction – to tell stories – but the researchers have something different in mind – internal processes and unspoken contents. There is no possibility for real consent because there is no way to guarantee in advance what kinds of internal contents and processes will come to light.

There is no simple solution to this problem. In the case presented here, we tried to address this in several ways. First of all, all participants (and of course, their parents) knew that the whole process would be evaluated and that one of the main purposes was to understand what happened to the children.

This, in my opinion, is not enough. It is too general, and parents eager for their children to participate in the program will say "yes" to almost anything. So, we also set some rules for ourselves. The first rule was total anonymity. There was no way to connect a story with a child. The stories were marked for gender, age, and group but with no name. Each story was given a number that served in the process of analysis. At the end of the analysis, the categorical characteristics of each story were combined with the child's personal details of age, gender, and group, but not with the story itself.

The focus of the research was not the individual, but the group results and the phenomenon. That is the way the material was analyzed and that is the way we looked at the results. In the end, we only have answers to questions of cross-cutting changes that are not related to any individual child. We would be unable to say anything about an individual child from the data we collected.

When weighting the benefits of using projective techniques against the ethical problems in this specific case, I personally believe the balance to be in favor of using these techniques. The knowledge we and the people of the program gained from this procedure concerning the ways the children cope with reality, their mechanisms of defense, and how a program can support and strengthen them is very important for the future treatment of these particular children and, of course, for many others. I still feel uneasy about the manipulation of the subjects, but there is no clear-cut solution to this dilemma aside from being aware of it and being very careful when using this kind of technique.

I can't leave the reader without some information about the program results. After comparing all groups, we couldn't find any significant differences between them. Observations of the group work, however, showed many different styles and ways of working among the group leaders, from psychotherapeutic approaches to art activities and group games. It seems that what worked was not a specific approach to group work, but the existence of a group of equals, gathered in a "safe space" that was consistent, with clear boundaries and norms (each group had its own, but there were always rules) with reliable adults – all things that are missing in their lives, but which gave the children the strength that they needed.

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