EXPLORATORY STUDY ON THE PROCESS
OF
EARLY RECOLLECTION INTERPRETATION

by
RICHARD M. CARLIN

B.A., Miami University, Oxford, Ohio, 1967
M.A., Miami University, Oxford, Ohio, 1969

A THESIS SUBMITTED IN PARTIAL FULFILLMENT OF
THE REQUIREMENTS FOR THE DEGREE OF
MASTER OF ARTS

in
THE FACULTY OF GRADUATE STUDIES
(Department of Counselling Psychology)

We accept this thesis as conforming
to the required standard

THE UNIVERSITY OF BRITISH COLUMBIA
June, 1985
© Richard Michael Carlin, 1985
In presenting this thesis in partial fulfilment of the requirements for an advanced degree at the University of British Columbia, I agree that the Library shall make it freely available for reference and study. I further agree that permission for extensive copying of this thesis for scholarly purposes may be granted by the head of my department or by his or her representatives. It is understood that copying or publication of this thesis for financial gain shall not be allowed without my written permission.

Department of Counselling Psychology (education)

The University of British Columbia
1956 Main Mall
Vancouver, Canada
V6T 1Y3

Date 25/6/85
ABSTRACT

This study explored the reasoning process of interpreters during the process of early recollection (ER) interpretation, and in the identification of central life style theme using Mosak's typology system (1971). ERs from ten subjects were collected using a questionnaire format and distributed to six interpreters. Three interpreters were experienced in ER interpretation and three received two hours of training in ER interpretation prior to the study. All interpreters were requested to record their impressions and thoughts during the interpretive process on audio tape for later analysis, and to assign a primary and secondary life style theme to each subject using Mosak's typologies. The results of this study provided information about the cues found in ERs that seem to guide interpreters, the effect of interpreter style on the final outcome, and the reliability of inter-judge agreement on life style theme from ER interpretation. The results showed that training in ER interpretation immediately provided the trainees with an ability to identify the perceptual schema of the subjects but it did not give them the same skill possessed by the experienced clinicians in metaphor analysis or an understanding of Mosak's typology system. Similarities and differences between the experienced clinicians and the trainees were analyzed.
TABLE OF CONTENTS

| Title Page                                      | ......................................................... | i |
| Abstract                                        | ........................................................... | ii |
| Table of Contents                               | .......................................................... | iii |
| List of Tables                                  | ................................................................... | vii |
| Acknowledgements                                | ................................................................... | viii |

CHAPTER

I  INTRODUCTION .................................................. 1

  Background and Rationale for Study .... 1
  Purpose of Study ................................. 3
  Significance of this Study .................. 4
  Definition of Terms ............................ 5

II  REVIEW OF THE LITERATURE ................................. 7

  Background to ERs ................................. 7

     Projective Techniques ........................... 8
     Contrast to Psychometric
     Studies ............................................. 8
     Projective Theory ............................... 9
     Validation Studies .............................. 11

  The Role of ERs in life style
  Analysis ............................................. 16
  Definition of Life Style ....................... 16
  Origin of Life Style ............................ 17
  Private Logic in Life Style ................... 17
  Life Style Analysis .............................. 18
  Value of ER Interpretation
  to Life Style Analysis ......................... 19
  Life Style Themes ................................ 19

  Process of ER Interpretation .................. 21
  Techniques for obtaining ERs ................. 21
  Approaches to Interpretation ................ 21
  Training Techniques ............................ 23
<table>
<thead>
<tr>
<th>III  METHODOLOGY</th>
<th>25</th>
</tr>
</thead>
<tbody>
<tr>
<td>Design of the Study</td>
<td>25</td>
</tr>
<tr>
<td>Subjects</td>
<td>25</td>
</tr>
<tr>
<td>Instrumentation</td>
<td>26</td>
</tr>
<tr>
<td>Interpretation Procedure</td>
<td>26</td>
</tr>
<tr>
<td>Description of Interpreters</td>
<td>27</td>
</tr>
<tr>
<td>Experienced Clinicians</td>
<td>27</td>
</tr>
<tr>
<td>Trainees</td>
<td>27</td>
</tr>
<tr>
<td>Data Collection Procedures</td>
<td>29</td>
</tr>
<tr>
<td>Subjects</td>
<td>29</td>
</tr>
<tr>
<td>Data Analysis</td>
<td>29</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>IV  RESULTS</td>
<td>33</td>
</tr>
<tr>
<td>Transcript Comparison of Anecdotal</td>
<td></td>
</tr>
<tr>
<td>Comments by the Interpreters</td>
<td>33</td>
</tr>
<tr>
<td>Summary of Common Perceptions</td>
<td>36</td>
</tr>
<tr>
<td>Interpretation Style of</td>
<td></td>
</tr>
<tr>
<td>Interpreters</td>
<td>37</td>
</tr>
<tr>
<td>Reasoning process used by</td>
<td></td>
</tr>
<tr>
<td>the Interpreters</td>
<td>40</td>
</tr>
<tr>
<td>Difference between Clinicians and</td>
<td></td>
</tr>
<tr>
<td>Trainees in Skill Level</td>
<td>41</td>
</tr>
<tr>
<td>Identification of Central Life</td>
<td></td>
</tr>
<tr>
<td>Style Theme</td>
<td>43</td>
</tr>
<tr>
<td>Reliability of Using ERs to</td>
<td></td>
</tr>
<tr>
<td>Identify Central Theme</td>
<td>43</td>
</tr>
<tr>
<td>Sources of Variability between</td>
<td></td>
</tr>
<tr>
<td>Clinicians</td>
<td>48</td>
</tr>
<tr>
<td>Problems associated with</td>
<td></td>
</tr>
<tr>
<td>Life Style Typologies</td>
<td>49</td>
</tr>
<tr>
<td>The Training Procedure in ER</td>
<td></td>
</tr>
<tr>
<td>Interpretation</td>
<td>51</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>V  DISCUSSION, LIMITATIONS,</td>
<td>56</td>
</tr>
<tr>
<td>RECOMMENDATIONS AND CONCLUSIONS</td>
<td></td>
</tr>
<tr>
<td></td>
<td>56</td>
</tr>
<tr>
<td>Discussion of Results</td>
<td></td>
</tr>
<tr>
<td>Transcript Comparison of</td>
<td></td>
</tr>
</tbody>
</table>
# LIST OF TABLES

<table>
<thead>
<tr>
<th>TABLE</th>
<th>Summary Table - Common Interpreter Perceptions</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Summary Table - Common Interpreter Perceptions</td>
<td>36</td>
</tr>
<tr>
<td>2</td>
<td>Identified Life Style Themes</td>
<td>44</td>
</tr>
<tr>
<td>3</td>
<td>Correlation of Primary LS Theme</td>
<td>45</td>
</tr>
<tr>
<td>4</td>
<td>Adjusted Trainees</td>
<td>46</td>
</tr>
<tr>
<td>5</td>
<td>Weighted Life Style Theme Choices</td>
<td>47</td>
</tr>
<tr>
<td>6</td>
<td>Extent of Theme Use</td>
<td>50</td>
</tr>
</tbody>
</table>
ACKNOWLEDGEMENTS

I wish to express my gratitude to the chairman of my committee, Dr. Bob Armstrong, and to the members of the committee, Drs. Larry Cochran and Norm Amundson for their assistance and guidance in this project.

I am additionally grateful to Tom Beames, Edna Nash, Bob Armstrong, Ken Neale, Maryanne Hansen, and Anne Chusid who volunteered their time and labor in assisting with this research.

A special vote of thanks goes to my wife Joi who was always supportive and helpful during the long hours spent writing this thesis.
CHAPTER I

INTRODUCTION

BACKGROUND AND RATIONALE FOR STUDY

The focus of this study is the interpretation and use of early recollections as a therapeutic tool. As an introduction to the project, a definition of the term early recollection, and a summary of the available literature follows.

A unique and fascinating approach to the understanding of how people perceive and interpret the world and individuals around them is gained from the interpretation of their early childhood memories. These early recollections (ERs) are generally defined as vividly recalled memories of single events which occurred before the age of eight. They are not to be confused with reports of past events which are memories established from either continually recurring episodes or from stories told to one by parents or others (Dreikurs, 1967). The ER must have a visual image to the individual and often has other sensory expressions associated with it. It is not an accidental memory but one which has been selectively chosen from countless other experiences that occurred during early life. It serves to emphasize situations, feelings or behaviors consistent with how the person presently views himself and the world (Adler, 1958;
Kelly, 1963; Mayman, 1968; Mosak, 1958). In this way the ER serves as a compass to orient the individual. It provides comfort or solice or directs the person to action.

The value of ERs in Adlerian Psychology derives from their use in formulating an individual's life style. Life style can be defined as a description of the operating strategies, beliefs, and attitudes which form a person's basic orientation toward life.

While initial research focused on the tangible aspects of memory (Potwin, 1901; Crook, 1931), later efforts examined the projective nature of ERs. A number of studies tested the degree to which ER interpretations correlated or verified the results obtained by accepted projective techniques such as the Rorschach, TAT, Bender-Gestalt, Wechsler-Bellevue, and others (Kadis, Green, and Freedman, 1952; Lieberman, 1957; McCarter, Tomkins, and Schiffman, 1961; Langs, 1965). The results showed correlations between the ERs and other devices that were greater than that expected by chance. Further attempts to establish the predictive validity of ERs yielded mixed results. ERs are good predictors of personality (Langs, 1965, Mayman, 1968; Kopp & Der, 1982) but poor predictors of actual behavior or psychopathology (Jackson and Sechrest, 1962; Ferguson, 1964; Hedvig, 1965). Nelson (1981) believes that an ER indicates an individual's expectancies from which he/she then forms an apperceptive schema which in turn develops into a life style. The ER, therefore, shows a
person's attitude rather than their action in a given situation.

The relationship of ERs to life style was posited by Adler (1958) but not researched until Ferguson (1964). She demonstrated ER reliability in deriving life style formations through inter-judge agreement at significantly better than chance levels. In the conclusion it was suggested that further studies of inter-judge reliability and clarification of salient characteristics of the ER content take place (Ferguson, 1964).

The organization of life style information into typologies was described by Mosak (1971) and examined by Magner-Harris et al. (1979). Using the technique of inter-judge agreement where two out of three judges agreed on one of Mosak's 13 life style types for a subject in 41 out of 60 cases, the Mosak "types" were said to contain sufficient information to allow clinicians to make life style decisions. To date, no other studies have tested the relationship of this typology system to life style.

The current literature describes further studies examining ER validity (Rogers, 1982; Kopp & Der, 1982; Hafner & Fakouri, 1984). The actual ER interpretation process and the methods used to instruct individuals in this process are in need of further study and elucidation.

PURPOSE OF STUDY

The general purposes of this research were to discover
the reasoning process that occurs during ER interpretation, the types of central life style themes that would be identified by interpreters, and the effectiveness of a training program in ER interpretation.

Specifically, the questions this study attempted to answer were:

1. Do interpreters perceive common ideas from cues found in the ERs?
2. What is the interpretive process used by interpreters and how does the reasoning process used in ER interpretation compare amongst interpreters?
3. Is there any reliability in using ERs to identify an individual's life style theme using Mosak's typologies?
4. How do the interpretations of the experienced clinicians compare to those of the trainees as a means of examining the effectiveness of a training program in ER interpretation?

SIGNIFICANCE OF THIS STUDY

This study has significance for both practitioners, such as counsellors, psychologists, social workers, etc., and the research community. It is expected that for interpreters using ERs as a therapeutic tool, the information from this study will provide assistance in the interpretation phase through identification as well as clarification of those perceptual skills which are most important for successful analysis. Additionally, to those contemplating training in
ER interpretation, a sense of what can and cannot be expected will be helpful.

The author hopes that the research community will be interested in the above information and expects that the evidence provided further validating inter-judge reliability and additional research involving Mosak's typology system will be appreciated.

This study is different from the rest of the literature in the following ways: No attempt has been made previously to document and compare interpreters' perceptions and methodology used to interpret ERs; inter-judge reliability of life style types derived from ERs has not been previously researched; and the training of counsellors in ER interpretations and comparison of their approaches and effectiveness to that of experienced clinicians has not been studied.

DEFINITION OF TERMS

Each of the following terms is used in this study. For some of these items, a distinction is made between the conceptual definition, or construct, and the operational definition as it relates specifically to this research.

Early recollection (ER): An individual's vividly recalled memory of a single event which occurred before the age of eight.

Life style (LS): An individual's characteristic pattern of life movement. This movement accounts for the consistancy
and directionality of the individual's observed verbal and nonverbal behavior.

Life style type: A life style type is the central theme through which behavior may be understood. A number of these have been characterized by Mosak (1971) from several self-defeating attitudes, beliefs, goals, and behaviors. Each life style type has distinct defining characteristics although it is not expected that they would be found in such pure form in most individuals. They are heuristic devices not descriptions of actual people.

Trainees: Counsellors possessing an M.A. degree with background of at least one basic course in Adlerian psychology but with no specific training in ER interpretation.

Experienced clinicians: Counsellors possessing an M.A. or Ph.D. degree, accredited by the Adlerian Institute (an APA approved school), who are thoroughly familiar with ER interpretation and currently using this technique in therapy.

Inter-judge agreement: Agreement by at least two out of three interpreters in selecting the same LS theme from a subjects' ERs.

Private logic: A series of biased apperceptions representing the significant personal values and convictions of an individual. They are not usually consensually validated but rather privately held convictions about life.
CHAPTER II

REVIEW OF LITERATURE

The literature relevant to this study is classified into four general areas: Background to ERs, projective techniques, the role of ERs in life style analysis, and the interpretation process.

BACKGROUND TO ERS

The first mention of ERs in the psychological literature occurred around the turn of the century (Hall, 1899; Henri, 1895, and Henri, 1898). Early investigations were primarily descriptive in nature, occupied with characterizing the age of the recollection, affective character of the memory and other aspects of memory content (Mosak, 1958).

It wasn't until later that early memories were recognized as being a powerful clinical tool. This tool was recognized by both Sigmund Freud and Alfred Adler, although they differed on its meaning. Freud theorized that ERs represented a screen whereby certain repressed conflicts were revealed but in disguised form (Freud, 1925; 1938). Memories were thought to cover up traumatic incidents of the past. The interpretation of manifest content in ERs from a Freudian perspective is not important as the memories only serve to screen repressed thoughts. Adler, however, postulated that the memories were selected to reveal, not hide, significant
personal guidelines. They served as reminders of individual limits and the meaning of circumstances (Adler, 1931).

The interpretation of manifest content from Adler's perspective is not only significant but primary to understanding an individual's fundamental view of life. According to Ansbacher (1973), ERs are considered to be the most outstanding and useful technique in Adlerian psychology today.

PROJECTIVE TECHNIQUES

Contrast to psychometric studies. A projective technique is one which assigns a relatively unstructured task to an individual and thereby permits an almost unlimited variety of responses (Anastasi, 1976). They typically are used to provide a global approach to the appraisal of personality; ie, one which focuses on a composite picture of the whole personality, which is especially effective in revealing covert, latent, or unconscious attitudes.

In contrast, psychometric procedures tend to present quite structured tasks to the individual. In return they typically provide numerical estimates of single aspects of performance. The two styles tend to differ in standardization of administration, scoring, and the adequacy of norms, reliability, and validity. Psychometric tests tend toward structured questions, objective scoring, statistical evaluation of results, and critical validation of predictive ability. Procedures are sought which everyone can use
equally well (Cronbach, 1960).

Projective devices rely strongly on the clinician to be a sensitive and skillful artist to insure the success of the procedure. In truth, "projective techniques are not truly tests, rather they are clinical tools. They serve as supplementary qualitative interviewing aids in the hands of a skilled clinician" (Anastasi, 1976, p. 584).

Using the concept from Information Theory (Cronbach & Gleser, 1965), projective techniques are "wide-band" procedures. They yield a wider range of information with a lower level of dependability. This is in contrast to psychometric tests which are viewed as "narrow-band" procedures producing more specific information at a high level of dependability.

Projective techniques "serve best in sequential decisions by suggesting leads for further exploration" (Anastasi, 1976, p. 586). They cannot be evaluated in the same terms as usual psychometric instruments.

Projective theory. The fundamental assumption of all projective techniques according to Anastasi (1976) is "...individual responses to the ambiguous stimuli reflect significant and relatively enduring attributes" (p. 584). The hypotheses associated with projective techniques are embedded in personality theory. This is strongly indicated by Frank's view (1948) that "We may therefore look upon the personality as a dynamic process, maintaining and defending that 'private
world' wherein he lives" (p.8). He elaborates his position further stating "...the individual organizes experience as he warps, twists, distorts, and otherwise fits every situation, event, and person into the framework of his private world..." (p.15). It is this private uncommunicated perspective that is elucidated through the interpretation of projective devices.

Every memory, however trivial it may be, is important in that it contains something memorable. It is an event or experience remembered not so much for itself but for its meaning to the individual. Early memories, according to Adler, are especially useful. They depict an individual's outlook on life and the circumstances in which he/she first crystallized this attitude (Adler, 1958). From all the thousands of possible experiences an individual only chooses to remember those which fit into his/her general and still current perspective of the world (Dreikurs, 1953).

The basic hypotheses supporting projective techniques are: The task assigned is unstructured and therefore open to individual interpretation; the individual typically is unaware of the implications of his answers; and the answers reflect significant and relatively enduring attributes (Zubin et al, 1965). Early recollections can be treated as a projective technique as they fulfill the above criteria. They are completely unstructured since the memory is influenced only by the individual's perceptual framework
which selects and reconstructs memories of personal importance (Mosak, 1958). Individuals rarely recognize the meaning of their early memories. They take them as "facts of life" and therefore are willing to relate them as a part of their personal history (Adler, 1958). The view that ERs reflect significant and enduring attributes has been tentatively substantiated (Ansbacher, 1947; Barrett, 1980; Hedvig, 1963; Warren, 1982). To the extent that the assumptions underlying projective techniques can be accepted, ERs can be considered to be a projective technique.

Validation studies. According to Monroe (1955) ERs were the first of the projective techniques. They were not researched as such until Kadis, Green, and Freedman (1952) examined the use of ERs in conjunction with another projective technique, the Thematic Apperception Test (TAT). Their study involved obtaining teacher's descriptions of 20 private high school females with respect to "persuing a task," and "relating to elders". Three judges then matched 10 TAT stories from each girl for each of the two characteristics described by the girls' teachers. When the girls' ERs were added to the TAT protocols, correct matchings for both characteristics increased. The authors state these results indicate that ERs clarify and integrate TAT material. This procedure may establish the use of ERs as a means of enhancing the effectiveness of the TAT but the methodology does not directly establish the concurrent validity of the ER
itself. The fact that only one ER was used from each girl also diminishes the reliability of using ERs in this context.

Lieberman (1957) studied a sample of eleven psychotic and eleven non-psychotic females. She compared the degree of correspondence between material revealed in their ERs and that found in other projective data. Her results showed the presence of more agreement than disagreement in relation to the type of material revealed in the psychological reports based on the projective test battery as compared to the reports based on ERs. The test battery consisted of the Wechsler-Bellevue, Rorschach, Bender-Gestalt, and House-Tree-Person drawings. This study tentatively suggests that ERs alone may rapidly provide the type of data that is obtained from more time consuming extensive projective techniques.

A further attempt to validate the projective use of ERs was reported in a study by McCarter, Tomkins, and Schiffman (1961). They examined the use of ER characteristics to predict performance on a number of the Tomkins-Horn Picture Arrangement Test (PAT) scales. The results showed a number of the predictions were significantly better than chance and the authors concluded that using PAT performance as criterion, ER's are a valid method of personality appraisal. This study however, used only one ER per subject and a projective technique, the PAT, which has not been thoroughly researched in itself.
Similarly, Jackson and Sechrest (1962) tested the assumption that ERs of a patient should correlate to their current neurotic symptoms; i.e. reflect current overt behavior. In brief, they hypothesized that depressed patients will give memories of abandonment, obsessive-compulsive patients will recall strong prohibitions, patients suffering from anxiety will have ERs showing obvious fear, and gastro-intestinal sufferers will have memories concerning gastro-intestinal distress. The results were insufficient to validate the use of ERs in a predictive sense, but did demonstrate a degree of correlation in all the hypotheses except for obsessive-compulsive patients.

The predictive value of ERs was also explored in a study by Langs (1965). ERs from 48 men were scored according to a prescribed method and compared to ratings on 76 personality variables selected from personal interview, TAT, Rorschach, the Wechsler-Bellevue, and a subject's autobiography. The results showed correlations between the ER variables and the personality variables that were greater than that expected by chance. Langs (1965) states, "the main thesis of this report lies not in the specific findings, which must be subjected to confirmation, but in the general hypothesis (which appears strongly confirmed) that the manifest content of the first memory is predictive of, and has a broad relationship to, personality" (p.389). This was a quantitative study
utilizing 773 predictions and 4,560 intercorrelations.

What the three previously quoted studies have in common is their reliance upon codes or scoring systems applied to the ER raw data as opposed to the approach utilized by Lieberman (1957), where clinician evaluation of themes and specific cues resulted in an overall ER interpretation. The results of the former, while being positive, do not indicate whether a clinician making a diagnostic judgement can formulate a valid differential diagnosis.

Ferguson (1964) investigated the ability of clinicians to make diagnostic judgements when she tested two hypotheses: The use of ERs by clinicians in formulating valid diagnoses of psychopathology, and the validity of using ER interpretations to derive life style formulations. The first part of the study obtained a number of ERs from each of 30 subjects. There were ten each of Psychotics, Neurotics, and Normals. Three judges independently wrote out life style summaries for each subject from their ERs and then made a diagnosis. The results showed that none of the judges were able to make a diagnosis of psychopathology at a better rate than that of chance.

In a later study by Hedvig (1965), similar conclusions were reached. Three Adlerian clinicians were able to diagnose 51 elementary and high school students as neurotic or adjustment reaction, conduct disturbance to only a limited extent. The combined results of the three clinicians were
significantly better than that expected by chance, but individually they differed widely in diagnostic ability. She suggested that the diagnostic ability appears to be dependent upon the ability of the individual clinician.

To date, the predictive use of ERs to accurately diagnose psychopathology appears questionable. This is accounted for by the fact that ERs reflect attitudes and not overt behaviors (Dreikurs, 1967; Mosak, 1958). These attitudes create an individual life style. It is the interaction of a given life style with a set of stressful environmental conditions that leads to manifest psychopathology (Adler, 1929; Dreikurs, 1950).

The second hypothesis tested by Ferguson (1964) examined the use of ERs in deriving life style formulations. A number of studies have correlated ERs to various personality traits (Langs, 1965; Mayman, 1968; Mosak, 1968; Verger & Camp, 1970; Warren, 1982; Kopp & Der, 1982), but only Ferguson examined the existence of inter-judge reliability in life style analysis. Seven clinicians matched life style summaries written by the judges of part I (see previous page) to the original ER protocols obtained from 10 of the original 30 subjects. The number of matchings (14 sets) resulted in significantly better than chance accuracy. Since five of the clinicians were non-Adlerians (2 eclectics and 3 Freudians) and unfamiliar with this use of ERs, Ferguson believes this substantiates the idea that life style summaries based on ERs
are reliably communicable to a wide range of professional workers. In conclusion, She suggests that "additional study is necessary regarding inter-judge reliability of life style formulations derived from ER" (Ferguson, 1964, p.410). One of her recommendations is that further study is needed in the clarification of the salient characteristics of ER that lead to a given life style formulation.

This is the only study which researched the relationship of ERs to the all encompassing aspect of life style as expressed by Adler. Recent research has focused on the coding and scoring of ERs (Kopp & Der, 1982; Barrett, 1983) and not on clinician use of ERs to derive life style analysis. Further investigations related to the use of ER to produce life style descriptions seems to be necessary.

THE ROLE OF ERs IN LIFE STYLE ANALYSIS

Definition of Life Style. Adler's theory of life style has been described by many theorists (Adler, 1958; Dreikurs, 1953; Shulman, 1973; Mosak, 1977). Ansbacher (1978) says it represents,

"...The organismic ideas of the individual as an actor rather than a reactor; of the purposiveness, goal-directedness, unity, self-consistency, and uniqueness of the individual; and of the ultimately subjective determination of his actions" (p.1).

For Adler, man was far more complex than the composite of genetics and environment. This holistic theory, first proposed by Smuts (1926), states that the whole is greater than the sum of its parts. This view led to the name
Individual Psychology, indicating 
"...the indivisibility of man, who is more than the sum total of all his physical, mental and emotional faculties and functions" (Dreikurs, 1967, p.5).

**Origin of lifestyle.** It is postulated that from the moment of birth a child acts, thinks, and feels in accordance with how he experiences and perceives the world (Pepper, 1971). These early observations take place within the family environment. This is the first group in which the individual seeks to belong and through which his scheme for living emerges (Sonstegard, 1973). This life plan matures in the social environment and out of these beliefs and operating strategies the lifestyle develops which characterizes the individual and everything that he does (Dreikurs, 1953). Part of the uniqueness of man is his ability to establish his own goals in line with the concepts and beliefs which he holds about the world and himself.

**Private Logic in lifestyle.** As the child makes continued subjective interpretations of life events, a "private logic" is created. This process is self reinforcing through continued selective apperception; that is, where strong personal convictions and value systems constantly bias new experiences.

"The private logic which each person evolves appears to justify his mistaken behavior, and prevents him from seeing that most of the difficulties and disappointments in his life are the logical consequences of mistakes in his life plan" (Dreikurs, 1953, p.45).
Adler proposed that this subjective perception of the world left all individuals feeling in some way inferior to their surroundings. This caused a basic motivation to strive towards overcoming the perceived inferiority. The approach used by each individual is unique.

**Life style analysis.** A complete life style analysis always comprises three areas of investigation: observation of *in vivo* behavior, a summary of family constellation data, and interpretation of early recollections.

Direct observation of behavior allows the counsellor to perceive a client's recurrent response patterns that occur congruent to the private logic and hence denote the life style. These re-occurring themes convey the essence of the individual's movement toward a goal.

According to Gushurst (1978), the information in a family constellation appears, upon the surface, to be quite ordinary. However, it is the integration through Adlerian theory which provides the "birds eye view of the personality in its nascent state" (Shulman, 1962).

"A life style investigation initially focuses on an individual's constellation by examining the extent to which such factors as birth order, sibling interactions, and parental values and attitudes influence personality development" (Fckstein et al., 1981, p.28)

Once the developing environment is understood through the family constellation, it is possible to "...determine from his ERs the conclusions he drew under those circumstances"
Through interpreting the ERs, the individual's current outlook on life is obtained.

The value of ER interpretation to life style analysis. The value of ER interpretation to life style analysis comes from comparing the belief system or private logic exhibited in an individual's ERs to a more objective social reality or to social norms. These norms, collectively termed social interest, are associated with concepts such as cooperation, self responsibility, respect for others, social equality, and interest in others. The clinician's task is to identify through the ER where the client's private logic has created some "basic mistakes". These are misconceptions that developed in childhood as a result of conclusions based on early experiences. They often typify one of 3 types of errors: simplification, exaggeration and mistaking a part for the whole (Shulman, 1973). Once elements have been recognized within the ER that portray the perceptual reality of the client, the life style is revealed using a number of different techniques.

Life style themes. One means of organizing LS information is through the use of LS themes or typologies. These represent groupings of probable selections of behavior associated with different life styles. While any taxonomic structure contradicts the Adlerian assumption of the uniqueness of the individual, the notion that similarities exist between individual life styles has been posited by
different authors (Ansbacher & Ansbacher, 1956; Shulman, 1973). These typologies were elaborated upon and further described by Mosak (1971) and Kefir and Corsini (1974). It has been "Mosak's 14 types" described in Nikelly's book (Mosak, 1971) that have received the most attention. In his own words, Mosak (1979) describes these as "heuristic devices", and not as a classification scheme. Typologies in general, and "Mosak's 14 types" specifically, are seen as valuable to research which attempts to support the tenets of Adlerian psychology. This was pointed out by Magner-Harris, Riordan, Kern, & Curlette (1979) in referring to typologies,

"...the practical difficulty of categorizing idiographic behavior into nomothetic units has the potential of being accomplished without damaging the theoretical spirit of Adlerian thought."(p.197)

Their study examined the inter-judge agreement on LS types using 13 of Mosak's types (excluding Superiority) based on information contained in a Life Style Questionnaire Inventory (LSQI). The results showed 2 out of 3 judges agreeing on one of Mosak's 13 types for a subject in 41 out of 60 cases. Their conclusion was that "...the conceptual pool of Mosak's 13 types contains sufficient information to allow clinicians to make consistent life style decisions..."(Magner-Harris, Riordan, Kern, & Curlette, 1979, p.200).

No further research has been reported using this typology system. A natural outcome of this study would be to
explore the use of ERs in determining LS based upon Mosak's typology descriptors.

PROCESS OF ER INTERPRETATION

Techniques for obtaining ERs. Instructions for obtaining ERs have been outlined by a number of authors (Mosak, 1958; Olson, 1979; Kopp and Der, 1982). As stated by Olson (1979), "The actual words used in the instructions are not critical provided that the directions do not bias the recollection" (p.69). The ideal approach is to use the interview technique whereby the client provides the memory and the interviewer then responds with a number of questions. This is done to elicit more details from vague ERs as well as to highlight the most vivid portion of the memory and the feelings that are associated with this section. The need for obtaining sufficient details was stressed by Dreikurs (1952) and elaborated upon by Kopp and Der (1982) to the extent that they standardized a range of 15 questions to be phrased in a nondirective manner at various points during the interview. There is also a precedent for using a questionnaire to elicit ERs from a number of subjects (Rule, 1972; Altman, 1973; Zarski, 1978). The instructions distinguish a report from an ER (Mosak, 1958) and request only memories from before the age of eight (Dreikurs, 1967). Additional instructions follow the pattern of information given in an interview setting.

Approaches to Interpretation. The literature is lacking in
specific techniques and their use in interpreting ERs. Only a limited number of authors have published their techniques (Mosak, 1958; Nikelly and Verger, 1971; Olson, 1979; Kopp and Der, 1979) reserving most of their expertise and abilities in this realm to the classroom or workshop. While it appears that much of the interpretation is based on recognition of key themes, patterns and vocabulary, there is an intrinsic element needed which is not so easily described. It falls somewhere between empathy to the client and a grasp of the essentials and complexities of the Adlerian theory of personality. The transcription of the interpretive process using examples of ERs and sample interpretations cannot easily penetrate this barrier.

The orderliness of presenting the interpretive process is lost in Mosak's (1958) paper as he attempts to deal with a number of issues in addition to this one skill. This process is improved in Olson (1979) and elaborated further by Willhite (1978) and Kopp and Der (1979).

Willhite has his client construct a new version of the existing ER. By substituting different behaviors and choosing desired emotions for the originals, the client begins to realize what patterns he/she wants to avoid. Willhite emphasizes the importance of including all client information in order to better understand the emotional perspective of the client which assists in the ER interpretation.
Kopp & Der assess the ER through separating and interpreting each action unit of the memory. This is related to the client who reacts to the assessment. An overall interpretation then attempts to combine the previously mentioned factors into a statement of growth facilitating and growth inhibiting attitudes.

An example of a method used to interpret ERs given by Olson (1979) is called the motto technique. This attempts to enunciate the guiding principle found in the ER using a simple phrase such as "the world is unfair" or "I like to help others". Upon completion, the client has identified some self-defeating attitudes, beliefs, or goals associated with his life style.

The element which these papers fail to examine is the process by which different clinicians assign meaning to ERs. It is this topic which is addressed in the current paper.

Training Techniques. There is virtually no published data on training programs in the interpretation of ERs. Olson's (1979) text provides an up to date summary of examples and techniques for ER interpretation but suggests no skill development procedure. He provides a reader practice section with client ERs and their interpretation and encourages the reader to "...study the recollection and write out interpretive statements in the first person" (p.325). Mosak, Schneider, and Mosak (1980) have a "Life Style" workbook with an extensive array of practice ERs for the reader to develop
his/her skill at interpretation but no suggested plan to accomplish this goal. Nowhere is there provided a model for a program on ER interpretation such as is given by Huber (1981) or Lowe and Lowe (1981) on life style assessment. It would seem reasonable that such a program should be developed to teach the skills associated with ER interpretation.
CHAPTER III

METHODOLOGY

DESIGN OF THE STUDY

ERs were collected from 20 subjects using an established questionnaire (Rule, 1972; Altman, 1973; and Zarski, 1978). The completed questionnaires were sorted for sex of the individual and then female and male questionnaires, five each, were randomly selected for interpretation by the six interpreters. These questionnaires were coded one through ten. The six interpreters, three with extensive previous interpretive experience and three with limited previous experience, interpreted the ERs by classifying them using Mosak's types (1971) and tape recorded their reasoning process as they arrived at their interpretations. The inexperienced interpreters received training in ER interpretation prior to examining the subject questionnaires as a part of this study. The results were evaluated through comparing the typology choices and the anecdotal comments derived from transcribing the taped accounts from the three clinicians and the three trainees.

SUBJECTS

The subjects for this study consisted of 5 females and 5 males over the age of 25, who were English speaking, and personally known to the investigator. The specific identity
of each subject was protected through requiring information on the questionnaire only as to the sex of the individual.

INSTRUMENTATION

In this study, The questionnaire used to collect ERs was a modification of the instruments developed by Rule (1972), Altman (1973), and Zarski (1978). It consists of a page of instructions plus the questionnaire asking for three early recollections. The instructions stress the following directions: The importance of recording only true recollections (not reports) and only those which occurred before the age of eight (Mosak, 1958; Dreikurs, 1967; Verger and Camp, 1970); the importance of including details and emotions; the need to record the recollections in the order that you remember them rather than chronological order (Dreikurs, 1967); and the importance of stating which scene of the memory is most vivid and how you were feeling at this moment. (see Appendix # 1)

Typically from three to six ERs are requested per subject. The accuracy of the interpretation increases when it is based on additional memories (Kopp & Dinkmeyer, 1975). The choice of requesting three memories per subject for this questionnaire was based on the literature (Verger & Camp, 1970; Kopp & Dinkmeyer, 1975) and the time requirements necessary for ER interpretation. (see Appendix # 2)

INTERPRETATION PROCEDURE

The coded questionnaires were prepared for examination in
the following manner. They were each duplicated by making a
typed copy which removed handwriting as a factor in the
interpretation but maintained all grammatical, syntactical,
and spelling idiosyncracies. In addition, space was provided
for classifying each questionnaire as representing a primary
life style and two possible secondary life styles themes.

Each clinician and trainee received a copy of the ten
numbered questionnaires, an audio tape, and a copy of Mosak's
paper (1971) "Lifestyle", describing 14 probable behaviors
related to life style themes (see Appendix, # 3). They were
instructed (see Appendix # 4) to read the ERs of each subject
individually, and to then classify each one into one primary
and two secondary central themes using Mosak's article.
During this process they were requested to use the audio tape
to verbalize their thoughts, impressions, insights, and
reasons for choosing particular life style designations.

DESCRIPTION OF INTERPRETERS

Experienced Clinicians. The three experienced clinicians
chosen were all familiar with early recollections, the
interpretation process, and the relationship of this
interpretation to life style. Each is recognized by the
Alfred Adler Institute (Chicago, Ill.), an APA accredited
school, as possessing thorough knowledge in this area of
psychology. The questionnaires were prepared as explained
above and distributed to the three clinicians with the Mosak
article (1971), audio tape and instructions.
Trainees. The three trainees chosen were personally known to the investigator. Each possessed a masters degree in Counselling Psychology from an accredited university and each was familiar with Adlerian Psychology, although they had not had extensive training or experience in the use of ERs.

Each received two hours training in the interpretation of ERs. The program used was a modification of one mentioned by Mosak (1958) and described in detail by Mica Katz 1 (see Appendix # 5). The trainees were instructed in the theoretical framework of ERs as a projective technique, in the method of eliciting ERs from clients, and in the overall interpretive process. This process emphasized the following:

The need to recognize essential themes present about "myself", "others", and "the world"; the need to identify significant elements such as activeness or passiveness of subjects; colours or details present; relationships to others such as smaller, larger, strong, weak, etc.; and the importance of stating the interpretation in the first person.

A number of sample ERs and their interpretations taken from Olson (1979) were used to practice this skill. Competence was considered achieved when the trainees were able to consistently identify information found in the accompanying interpretations provided by Olson (1979). The life style themes by Mosak (1971) were then examined and matched with the practice ER interpretations. At the end of this training period the trainees were provided with the 10 numbered
questionnaires, an audio tape, and instructions identical to that provided to the experienced clinicians.

DATA COLLECTION PROCEDURE

Subjects. All subjects were given the instructions and the ER questionnaire and requested to complete and return the material by a specified date. The researcher made himself available to answer any questions and a number of the subjects asked for clarification on a few of the points in the instructions. A number of the subjects commented to the researcher after completing the questionnaire that they found the experience quite enjoyable and asked for additional information regarding the nature and use of ERs.

DATA ANALYSIS

The data from this study consisted of the audio taped comments and the identified life style themes from the six interpreters for each of the ten subjects. The anecdotal comments were analyzed for process information while the typology choices were used to assess clinician reliability of ER interpretations.

The taped narratives from the six interpreters were carefully transcribed for examination and comparison (see Appendix # 6). This consisted of a number of progressive steps. The comments by all six of the interpreters were compared for one subject at a time. Commonly identified phrases or perceptions were noted and used to assess the type of information available to all of the interpreters.
Comments such as "wanting attention or reassurance" or "feeling overwhelmed and dejected" that were recognized by at least five out of six interpreters were highlighted and listed in Table 1. Each interpreter was next analyzed for the process they went through interpreting the ten subjects' ERs. This involved looking for patterns and styles used by the interpreters when they were generating their conclusions for each set of ERs. Some of the patterns used by the interpreters were the headline technique (Sick Girl Misses Own Party), the theme approach such as a loss of control or a sense of helplessness, or a series of statements about how the subject views the world, others, and him/herself. The degree to which all of the ERs were used and the number of examples cited also contributed to individual style. From these patterns, a description was proposed consisting of what each seemed to be doing when interpreting ERs. Differences in skill level between experienced clinicians and trainees was determined through comparing the extent to which the two groups used the patterns described above. A typical example would be where a trainee would use only one of the three ERs and say that the subject was scared and looks to mom to get her out of trouble. A clinician, for this same subject, said the subject feels vulnerable, life is dangerous, men are weak and women strong, wants to be in control but feels inadequate, and wants to be looked after by women.

The central life style themes chosen for each subject by
the six interpreters were then organized and arrayed in Table 2. The reliability of the clinicians' ER interpretations was examined by using a system of agreement by at least two out of three on primary life style choice in a process similar to that used by Cline, Riorden, and Kern (1978). This process was also followed for the trainees' life style designations. All interpreters were requested to make secondary life style choices for each subject in addition to their primary selection. In an effort to use all of this information life style themes were weighted. If a theme was used as a primary choice by an interpreter it was awarded a value of two, and if used as a secondary choice a value of one. This allowed for more complete comparison between interpreter choices than provided by a simple proportion of agreement for primary life style choice alone. Considering the experienced clinicians and the trainees separately, a value of six, five, or four for a life style theme for any subject would indicate a strong degree of interpreter agreement. This theme would have been chosen as primary or secondary by all three clinicians or by all three trainees (three primary choices equal six points, two primary and one secondary choice equal five points, and one primary and two secondary choices equal four points).

The training procedure in ER interpretation provided a specific format for analyzing the content of a series of ERs. The transcripts for each trainee were examined to see how
closely they compared to the approach in which they were instructed. The trainee choice for life style type for each subject was then compared to that chosen by the experienced clinicians where strong clinician agreement provided a reliable reference criterion. Using these two approaches the effectiveness of the training program was able to be evaluated.
CHAPTER IV

RESULTS

The results of this study are organized first into three broad themes: Transcript comparison of anecdotal comments by the interpreters; identified central life style (LS) themes; and the training procedure in ER interpretation; and then, within these themes according to the research questions as outlined in chapter one. Important findings are highlighted, though more complete interpretation of these findings will be left for chapter five.

TRANSCRIPT COMPARISON OF ANECDOTAL COMMENTS BY THE INTERPRETERS

The transcribed comments of the six interpreters were examined to identify common perceptions made from cognitive cues found in the ERs, delineate interpretation style of the clinicians and trainees, compare the reasoning process used by all the interpreters, and contrast the skill of the experienced clinicians to that of the trainees.

Each of the three clinicians and three trainees interpreting the sample ERs provided an audio tape of the process they went through to arrive at a LS theme from Mosak's typologies (1971). A complete transcription of these results will be found in Appendix, # 6. A sample from each interpreter from subject one follows:
Clinician C1 on subject 1: First ER. A lot of excitement but possibly a getter from the birthday party memory. The basement is an overwhelming experience—it makes her sick. She wanted support and confidence of dad in attending to her. She made this happen. Accomplished this through intimidation.

There are several getter characteristics and someone who tends to find life overwhelming when it goes wrong and feels inadequate (wants support and warmth of loving male).

She feels weak and helpless in an unpredictable world which is able to overwhelm her without prior warning. Life is unfair when things should be at their best. "Life strikes and I am overwhelmed with a total loss of control." She is entitled but feeling inadequate.

Clinician C2 on subject 1: First ER. The headline for this ER is "sick girl misses own party". I'm special and men are kind to me. Life is a place where people do things for me. In order to have a place I am the center of attention (receiving attention).

In all three of the ERs, life is full of the unexpected. In the first ER she misses a wonderful party; in the second ER an unexpected gift from the bus driver; and in the third the unexpected punishment. When I do wrong women punish me and I pay the price.

A theme of getter from sense of being special and getting presents. Possibly some of victim from missing party
and receiving punishment.

Clinician C3 on subject 1: This is a getter personality. She gets just about everything she wants: In the first ER she gets her dad; In the second ER she gets the "biggest candy cane ever seen"; and in the third she gets a "perm". This is not the main theme here but it is there all the same. Excitement also seems to be present in the three ERs. In the first "everything was so exciting", in the second the holidays and the candy cane were exciting and in the third "goofing off" was also exciting. My third LS choice is "baby". I see someone who gets a lot of service. This is not very strong.

Trainee T1 on subject 1: First ER. Others take care of me. Givers and caretakers give one independence. The world is exciting and dangerous. I am a victim.

Second ER. Others are givers and doers (they give to me). They control the goods. The world is full of goodies and I am a taker of those goodies.

Third ER. Others do for me and set rules for me. The world is full of rules and I am a rulebreaker. I must depend on others to act.

Trainee T2 on subject 1: Life is a dangerous place. Things go wrong and accidents occur. I cope by putting others in service to me. The subject tries to get things or obtain things from others—possibly pity or sympathy.

Trainee T3 on subject 1: You are very excited—you have
an accident and this disappoints you. You want dad to help you; you like to feel happy. The unexpected is hard to cope with. If you have any fault in it you feel guilty.

**Summary of common perceptions.** Upon perusal of the transcribed comments by the interpreters, certain phrases or words were regularly noticed and used in the interpretations. These are summarized in the following table:

<table>
<thead>
<tr>
<th>Subject</th>
<th>Common perceptions</th>
</tr>
</thead>
</table>
| 1       | Wants support or attention  
          | Puts others in service  
          | Excitement or unexpectedness |
| 2       | Inadequacy or weakness  
          | Revenge or need to control |
| 3       | Feeling overwhelmed, sad  
          | dejected  
          | Getting from others |
| 4       | Out of control  
          | Helpless |
| 5       | Doing things the right way  
          | Being superior or perfect |
| 6       | Sense of smallness  
          | Being the center of attention |
| 7       | The need to be right  
          | Pain or suffering |
| 8       | The world is full of dangers |
| 9       | Controlling |
The fact that these expressions were used by the interpreters did not in all cases mean they reached the same conclusion for a central LS theme. This fact is discussed later in the results. There did appear to be a correlation between the expressions in table 1 to those found in the ER questionnaire under "your feelings during this scene." Evidently the interpreters responded to the emotional overtones expressed in the feelings section of the questionnaire.

Interpretation Style of the Interpreters. Each of the interpreters went about the interpretation process from a slightly different perspective. A summation of their styles seems appropriate to the understanding of the reasoning process itself.

C-1: This clinician seems to look for and state an overall picture and use elements from each ER to validate the position. There is a continued recognition of metaphors (horizontal position = little, photograph = public display, death = ultimate loss of control) and comments on verbs (subject 2), nouns (subject 3), and other descriptive terms (subject 5 and 10) found in the ERs that serve to reinforce his interpretation.

C-2: This clinician uses the headline technique once to
highlight the main idea in an ER and then begins to use a set procedure for going through each ER of each subject. This method involves using a phrase which encapsulates how the subject views him/herself, the world, or other people. The phrases used are: Life or the world is ...(sad, dangerous, complicated); In order to have a place, I...(must be perfect); others are ...(givers, punishers); I am...(small, helpless, kind). In addition to using one or all of the phrases above for each ER in a series, this clinician validates her position by using concrete examples given in the ER itself.

C-3: This clinician appears to be using a theme approach. This involves going through each ER in a series and giving the LS theme (from Mosak, 1971) which seems appropriate. Examples from within the ER are used to validate the choices and comparisons between the ERs are used to determine the final central theme.

T-1: This trainee uses a pattern similar to that used by clinician C-2. For each ER in a series the following phrases are completed according to how the trainee understands the given content: Others are..., The world is..., I am... . After this is done for the three ERs a LS theme is chosen from the reference list (Mosak, 1971).

T-2: This trainee also uses a set pattern to interpret the ERs. The phrases, life is... and I cope..., are used to express the content of the ERs. This is not done for each ER
however, but only once as a summary for the whole series of three for each subject. In addition, few examples are used from the ER to validate an opinion.

T-3: This trainee also uses a set pattern to interpret the ERs but it is a very brief one. It consists of I am... or I like... or I want... and is done only once for each subject. All three of the ERs do not appear to be used to form this statement. Examples from the ER to reference an opinion are not used.

The style of the experienced clinicians, although slightly different, has definite similarities. They each go through and use all of the ERs for each subject to formulate their interpretation. For example:

The first ER shows I select and those not measuring up go into the garbage where they belong. The second ER shows I delight in doing it perfectly. No comparisons, just me doing it up to a standard. In the third ER I am accepted as an adult.

They validate their position through using examples given in the ERs and they each comment on the metaphors used within the ER. For example:

The final decision for the theme is to be right because "I was correct" in the first ER and I was surprised that parents did what was correct in the third ER and in the second ER I got them all correct.

"I can't make ends meet" is the body language. The feeling is different from the action. He doesn't fit. Scene has a lot of action and he is sitting. He is an observer. I don't fit, I'm outside looking in.

The trainees each use a set format to express their interpretation, but they generally use very few details,
examples, or comparisons between the ERs to rationalize their final opinion. Two examples from subject 10 follow:

Life is full of new things. There are new situations to be dealt with and it is difficult to adjust to this. I cope by seeking others reassurance and by fitting in.

I feel nervous every time I am on unfamiliar ground and terrified when threats come up so I need to run away to mom. Mom is important to me. I want her to be with me and do things for me and I feel good with her and safe.

Reasoning Process used by the Interpreters. This is a derived quantity from examining the interpretive styles shown above. There are two elements that distinctly serve to guide the interpreter's comprehension of the ERs: The metaphorical symbolism and the generalized phrases used to capture the subject's perception of themselves, others and life in general.

The recognition of metaphorical language was clearly important toward establishing a base for interpreting the ERs. If the symbolism was misunderstood then the rationale for the interpretation was weakened. An example from subject two serves to demonstrate this. The metaphor of "fighting off lions with their bare hands (ER #1)" was seen by T-1 as an example of aloneness, by T-2 as an example of opposing, and not mentioned at all by T-3. All the experienced clinicians related this metaphor to feelings of weakness, inadequacy and the need for control. An example from subject four further exemplifies this point. In the runaway scene (ER #1), all six of the interpreters recognized the
importance of the metaphor but to greatly varying degrees. In the least, it was seen by T-2 as an unexpected accident or shock while T-1 and T-3 viewed it as an experience leaving the subject as helpless. The experienced clinicians all identified the feeling of helplessness, however they further recognized the metaphor as symbolizing a need to be in control.

The generalized phrase (life is..., I am..., etc.) used by the interpreters is apparently a message derived from the overall content of each ER. Sometimes it is a simple distillation of the emotional content from the subject's ER, while at other times it is derived from expressions not directly used by the subject but merely alluded to. This means there is sometimes quite a degree of variation between interpreters. An example is seen from subject seven: Comments vary for the third ER from "life is dangerous (C-2)", to "the world is intense and incomprehensible (T-1)", to "life is full of suffering (T-2)". These phrases summarize the "private logic" of the subject (Shulman, 1973) and apparently serve as a logical stepping stone for the interpreter to justify his interpretation and eventually designate a typological category.

Differences in Skill levels between Experienced Clinicians and Trainees. The experienced clinicians as a group demonstrated more skill in ER interpretation than the trainees.
Two of the three trainees did not use all of the ERs for each subject for their interpretations. The experienced clinicians used all of the ERs provided.

The trainees did not use many examples from the ERs to reference their statements while the experienced clinicians did.

The trainees mentioned the metaphorical content of the ERs less often than the experienced clinicians. They apparently relied upon generalized phrases more than upon metaphors. The experienced clinicians used both elements to interpret the ERs. For example, one of the clinicians said: The first ER shows a common scene of control; a runaway situation. You are proceeding comfortably down the road of life in company of loved ones when suddenly things go out of control; even mom is concerned. The comments of the trainees were: Life is full of unexpected accidents and sudden shocks. I cope by getting others to comfort and make me feel safe. I like to be warm and safe and comfortable but life gives me startling experiences which leave me helpless. The trainees recognized the elements of danger and safety but did not actively use the metaphor of a runaway horse to symbolize the need for control.

Reliability in reaching a consensus on LS theme was low amongst the trainees but high amongst the experienced clinicians (see Table 3 and Table 4).

The trainees, in general, had less to say about the ERs
than the experienced clinicians. Where they might use three to four sentences for their whole interpretation, the clinicians would use this many sentences for each of the three ERs and often end their comments with a summary. It has been previously stated that few examples were utilized and that metaphors were often not mentioned or explained. It is possible that the trainees were making less use of the cognitive cues within the ERs than the more experienced clinicians, since they did not make reference to all of the ERs provided and because they simply recorded less information on the audio tape.

IDENTIFICATION OF CENTRAL LIFE STYLE THEME

The central LS themes identified by the clinicians were examined through three sub-sections: The reliability of using ER interpretation in identifying life styles, the sources of variability between clinicians that result in different central themes being identified, and the problems associated with the use of life style typologies.

The reliability of using ERs to identify central LS theme.
The results showing the central LS themes chosen by the six interpreters for the ten subjects is given in table 2.
<table>
<thead>
<tr>
<th>Subject</th>
<th>C-1</th>
<th>C-2</th>
<th>C-3</th>
<th>T-1</th>
<th>T-2</th>
<th>T-3</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Getter</td>
<td>Getter</td>
<td>Victim</td>
<td>Excite.</td>
<td>Baby</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Control</td>
<td>Victim</td>
<td>Excite.</td>
<td>Getter</td>
<td>Opposer</td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Control</td>
<td>Control</td>
<td>Victim</td>
<td>Opposer</td>
<td>Opposer</td>
<td>Excite.</td>
</tr>
<tr>
<td></td>
<td>Inadeq.</td>
<td>Inadeq.</td>
<td>Inadeq.</td>
<td>Getter</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Getter</td>
<td>Control</td>
<td>Be Right</td>
<td>Driver</td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Control</td>
<td>Control</td>
<td>Control</td>
<td>Victim</td>
<td>Superior</td>
<td>Victim</td>
</tr>
<tr>
<td></td>
<td>Inadeq.</td>
<td>Be Liked</td>
<td>Be Liked</td>
<td>Victim</td>
<td>Getter</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Be Right</td>
<td>Be Liked</td>
<td>Be Right</td>
<td>Be Right</td>
<td>Be Liked</td>
<td>Be Liked</td>
</tr>
<tr>
<td></td>
<td>Be Liked</td>
<td>Be Right</td>
<td>Superior</td>
<td>Be Good</td>
<td>Be Right</td>
<td>Superior</td>
</tr>
<tr>
<td>6</td>
<td>Baby</td>
<td>Excite.</td>
<td>Baby</td>
<td>Baby</td>
<td>Victim</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Inadeq.</td>
<td>Baby</td>
<td>Inadeq.</td>
<td>Victim</td>
<td></td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Be Right</td>
<td>Be Right</td>
<td>Be Right</td>
<td>Martyr</td>
<td>Getter</td>
<td>Getter</td>
</tr>
<tr>
<td></td>
<td>Excite.</td>
<td>Driver</td>
<td>Superior</td>
<td>Martyr</td>
<td>Driver</td>
<td>Martyr</td>
</tr>
<tr>
<td>8</td>
<td>Baby</td>
<td>Be Liked</td>
<td>No Feel</td>
<td>Be Good</td>
<td>Inadeq.</td>
<td>Baby</td>
</tr>
<tr>
<td></td>
<td>Inadeq.</td>
<td>Control</td>
<td>Control</td>
<td>Be Liked</td>
<td></td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>Control</td>
<td>Be Liked</td>
<td>Driver</td>
<td>Control</td>
<td>Be Liked</td>
<td>Be Liked</td>
</tr>
<tr>
<td></td>
<td>Getter</td>
<td>Control</td>
<td>No Feel</td>
<td>Control</td>
<td></td>
<td>Excite.</td>
</tr>
<tr>
<td>10</td>
<td>Baby</td>
<td>Getter</td>
<td>Getter</td>
<td>Be Liked</td>
<td>Baby</td>
<td>Inadeq.</td>
</tr>
<tr>
<td></td>
<td>Inadeq.</td>
<td>Control</td>
<td>Be Liked</td>
<td>Victim</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
The results from Table 2 can be simplified by grouping subjects whose ER interpretations resulted in consistent agreement between interpreters for choice of LS theme. This degree of correlation for primary LS theme is given in Table 3 for both experienced clinicians and trainees. This is shown through a proportion of agreement of 2 of the 3 interpreters or 3 of the 3 interpreters as established by Cline, Riordan, and Kern (1978).

TABLE 3

Correlation of Primary LS Theme

<table>
<thead>
<tr>
<th>Experienced Clinicians</th>
<th>Trainees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Agreement by 2/3 3/3</td>
<td>Agreement by 2/3 3/3</td>
</tr>
<tr>
<td>Subject #</td>
<td>Subject #</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>4</td>
</tr>
<tr>
<td>6</td>
<td>10</td>
</tr>
<tr>
<td>Total</td>
<td>5/10</td>
</tr>
</tbody>
</table>

Table 3 shows that two or more of the experienced clinicians agreed on the central LS theme for 8 of the 10 subjects examined. These results support the work by Ferguson (1964) on inter-judge reliability using ERs to establish life style theme.

As the trainee's LS choice did not always concur with that of the experienced clinicians, Table 4 shows the degree of trainee agreement for those times when LS choice was the same for both groups.
The results in Table 3 show that superficially the trainees are nearly as skilled as the experienced clinicians at identifying life styles from ER interpretations. There was agreement by 2 or more of the trainees on LS theme for 7 of the 10 subjects. However, as shown in Table 4 this inter-judge agreement only occurs for 1 of the 10 subjects when the LS theme identified by the experienced clinicians is used as the criterion. It would appear that the trainees are not effectively translating the information derived from the ER interpretation into Mosak's typology system, or they are focusing on some outstanding event and using that to classify the ERs rather than using contradictory evidence to look for "the line that joins two points" (Dreikurs, 1965).

The disparity between the experienced clinicians and the trainees in designating LS type prompted the author to examine the following data for the experienced clinicians only. In an attempt to compare all of the clinician choices (primary and secondary) for central LS theme for each subject, Table 5 was composed. From clinician responses to the ER questionnaire, a primary LS choice was awarded a value.
of 2 and a secondary LS choice was awarded a value of 1. This means any LS theme chosen as primary by three clinicians would have a value of 6; chosen twice as primary and once as secondary, a value of 5; and chosen once as primary and twice as secondary, a value of 4.

**TABLE 5**

Weighted Life Style Theme Choices

<table>
<thead>
<tr>
<th>Subject #</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
</tr>
</thead>
<tbody>
<tr>
<td>LS Theme</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Control</td>
<td>1</td>
<td>4</td>
<td>1</td>
<td>6</td>
<td></td>
<td>1</td>
<td>2</td>
<td>4(2)</td>
<td>2</td>
<td></td>
</tr>
<tr>
<td>Getter</td>
<td>6(1)</td>
<td>1</td>
<td>1(2)</td>
<td>1</td>
<td>1</td>
<td>(4)</td>
<td>1</td>
<td>1</td>
<td>4</td>
<td></td>
</tr>
<tr>
<td>Inadeq.</td>
<td>1</td>
<td>3</td>
<td>2(5)</td>
<td>1</td>
<td>2</td>
<td></td>
<td>1(2)</td>
<td>1(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Be Liked</td>
<td></td>
<td>1</td>
<td>3</td>
<td>3(4)</td>
<td></td>
<td>3</td>
<td>2(4)</td>
<td>1(2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Victim</td>
<td>1(2)</td>
<td>3</td>
<td>4(1)</td>
<td>1(5)</td>
<td>1(2)</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Be Right</td>
<td></td>
<td>1</td>
<td></td>
<td>5(3)</td>
<td>1</td>
<td>6</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Baby</td>
<td>1(2)</td>
<td></td>
<td></td>
<td>5(4)</td>
<td>2(2)</td>
<td>2(2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Excite.</td>
<td>1(2)</td>
<td>1(1)</td>
<td></td>
<td>1</td>
<td></td>
<td>1(1)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Superior</td>
<td></td>
<td>(1)</td>
<td>2</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Driver</td>
<td>1</td>
<td>1(1)</td>
<td></td>
<td>2</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No Feel.</td>
<td></td>
<td></td>
<td></td>
<td>2</td>
<td>1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Be Good</td>
<td></td>
<td>1</td>
<td></td>
<td></td>
<td>(2)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Martyr</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>1(3)</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Opposer</td>
<td>(1)</td>
<td>(4)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

() = trainee score

In the table, a value of 4 or more is achieved for each subject except for subject 8. This suggests an even greater
correlation for the experienced clinicians than was shown in Table 3. When both the primary and secondary choices are considered the experienced clinicians are able to arrive at a consensus for LS theme for 9 out of the 10 subjects. The presence of more than one LS theme for individuals is described by Mosak (1968), and should not be ignored when examining clinician skill in correlating ER interpretation to LS theme.

Sources of variability between clinicians. For reasons enumerated above clinician variability in LS typology choice was considered for the experienced clinicians only. There seemed to be five distinct causes for common cues within the ERs to result in different clinician LS choices. These are: Need for additional detail, ER emphasis used, typology definitions, need for client verification, and clinician oversight.

In all but one subject the clinicians recognized and commented on the same cues found within the ERs. Only in the ERs of subject 8 was this not true, and yet 2 of the 3 clinicians commented clearly for this subject that they needed additional detail to make a more confident determination.

Traditionally, the first ER provided by a subject is considered to be the most important (Adler, 1931). The weighting of the first ER versus the two other ERs was evident in the clinician LS choices. It appeared that the
position of the ER affected whether the interpretation was used as the primary LS theme or as a secondary or associated theme. This can be seen through examining the choices by clinician E-2 for subject 5, 6, and 9.

Typology definition affected clinician judgement clearly in the case of subject 3. There appears to be a degree of confusion between the themes of "victim" and "inadequate". This problem is discussed in the following section of the results.

When two or more themes are recognized equally by the clinicians the need for client verification becomes obvious. This occurred for subject 5 where prioritization of the LS theme choices "To be Right" and "To be Liked" would need subject input before a final decision may be made.

Clinician oversight accounted for 2 of the differences in LS theme choice. This is observed in reading the transcripts for clinician E-1 on subject 10 and that of clinician E-3 on subject 9. In both cases themes are described and then ignored when deciding the final LS typology.

Problems associated with life style typologies. Three possible areas of difficulty became apparent during the examination of Table 2: Skewed theme use, typology confusion, and central vs. associated themes.

There was a noticeable difference in the degree to which different LS themes were used by the experienced clinicians. This is shown in Table 6.
Table 6
Extent of Theme Use

<table>
<thead>
<tr>
<th>Theme</th>
<th>Number of times used</th>
</tr>
</thead>
<tbody>
<tr>
<td>Control</td>
<td>15</td>
</tr>
<tr>
<td>Getter</td>
<td>10</td>
</tr>
<tr>
<td>Inadequate</td>
<td>10</td>
</tr>
<tr>
<td>To be liked</td>
<td>10</td>
</tr>
<tr>
<td>Victim</td>
<td>9</td>
</tr>
<tr>
<td>To be right</td>
<td>8</td>
</tr>
<tr>
<td>Baby</td>
<td>6</td>
</tr>
<tr>
<td>Excitement</td>
<td>5</td>
</tr>
<tr>
<td>Superior</td>
<td>3</td>
</tr>
<tr>
<td>Driver</td>
<td>3</td>
</tr>
<tr>
<td>No feelings</td>
<td>2</td>
</tr>
<tr>
<td>To be good</td>
<td>1</td>
</tr>
<tr>
<td>Martyr</td>
<td>1</td>
</tr>
<tr>
<td>Opposer</td>
<td>0</td>
</tr>
</tbody>
</table>

This inequity might be due to a bias in the subject population used for this investigation (white, middle class, college graduates), an inherent problem in Mosak's typology choices, or it may possibly reflect a cultural bias where certain life styles are more common than are others in the white middle class population.

Typology confusion appears to exist between the themes "victim" and "inadequate" found in subject 3 as mentioned previously. Point of view appears to effect the decision and this often needs client verification impossible with a questionnaire format. It is possible this confusion exists as well between other typologies.

The primary and secondary choices for LS theme made by
the clinicians all represent perceived central themes. An individual may be described by central and associated themes (Mosak, 1979). This accounts for some of the results shown in Tables 2 and 5. Table 2 points out the preferences used by the individual clinicians in choosing the central theme or themes while Table 5 shows the weighted importance given the themes collectively. From examination of Table 5, subjects 1, 6, and 7 probably represent situations where only one central theme clearly exists; while subjects 2, 3, 4, 5, 8, 9, and 10 probably have central and associated themes composing their life styles. Superficial comparison of results from Table 2 may lead to erroneous conclusions concerning the skill of the experienced clinicians in determining the life style of subjects through their ERs.

THE TRAINING PROCEDURE IN ER INTERPRETATION

The training procedure amounted to presenting background and associated theoretical information followed by practical techniques to interpret ERs and arrive at a LS theme using Mosak's typology system. In brief, the trainees were told that ERs reflect a person's view of themselves and the world. Of all the many experiences occurring in an individual's life only a select few are remembered from childhood. These incidents which can still be vividly recalled are thought to characterize current attitudes and beliefs. They are remembered because they are important although their value is not consciously recognized by the individual.
The practical information was directed to identifying generalized phrases or themes, commenting on significant elements within the ER, using all three of the ERs to formulate LS information, and establishing a typology choice. Possible themes might reflect how life appears, how life should be if all were ideal, or the dangers present in life. Some ERs show coping strategies for problem solving or interpersonal approaches to get along in life.

The practice ERs were read out loud and the trainees were asked to characterize the theme or themes represented using examples from the ER to support their idea. Next, the ER was examined for the presence of significant elements or patterns. These are metaphors representing the personal belief system of an individual. The final stage involved using Mosak's list of types to characterize the life style of the subject.

Only T-1 provided generalized phrases for each ER. Trainee T-2 and T-3 used two or three generalized phrases for the entire set of ERs but not for each separately. An example follows:

T-1: In the first ER, others are nurturers and potentially inept protectors. The world is terrifying and a battleground and I am potentially alone (one fighter). The second ER has others disregarding my needs and receiving my fury. The world is a place of unfair expectations and I am vengeful and non-cooperative. A passive resister. In the third ER,
others are inept protectors or minimal caretakers. The world is harsh, cold and dangerous and I am a source of embarrassment and shame.

T-2: Life opposes me. Life is a struggle. I resist in a passive manner when people are against me. He constantly seeks revenge without doing anything to obtain it. Opposer with examples in all three ER. In the first, men are struggling against lions and losing. I can just lay there and be terrified and others comfort me. In the second, he just sat there upon being photographed but thought about revenge. In the last he is somewhat glad that his pants were frozen and this increased mom's anger.

T-3: When I am scared mom helps me out. When I get angry I take action myself. When I get into trouble mom helps me out. I can activate her.

Significant elements within the ERs were not elaborated upon in much detail by the trainees. Where something was mentioned it was brief and often not explained. Trainee T-2 made reference to the metaphorical content in the ERs of several subjects correlating this through examples taken from the reference material. T-1 and T-3 did not refer to any content in the ERs except through using the generalized phrases explained above.

Only trainee T-1 consistantly used all three ERs provided for each subject. Trainee T-2 and T-3 made generalizations for the whole set of ERs, sometimes ignoring or not using
information found in one of them.

Two or more trainees agreed with each other on typology choice 7 out of 10 times (Table 3), however they agreed with the choice of the experienced clinicians only 1 out of 10 times (Table 4). When the comments about the ERs made by the trainees are compared to the comments made by the experienced clinicians a number of similarities are noted (Table 1). Certainly in the example above the trainees amongst themselves identify similar themes: The world is terrifying and unfair, I am a passive resister and seek revenge, and I look to others to nurture, comfort and help me out. The life style chosen by two trainees is "opposer". This appears to stem from the sense of revenge and a need to resist the terrifying and unfair world. All three of the experienced clinicians also commented on similar themes but two chose a life style of "control" with secondary possibilities being "inadequate" or "victim". This pattern occurred regularly with all of the interpreters recognizing similar themes but the clinicians and trainees differing in LS type designation.

Mosak's typologies correlate personal convictions with probable selections of behavior. The trainees appear too literal in their translation of ER content to LS type. By this I mean they use the behaviors and feelings without detecting how this relates to the underlying goal or private logic of the subject that is implied in the LS type. The trainees in general only presented a primary typology choice
for life style (Table 2), while they were requested to "give one or two others as your secondary decisions". This might also point out their difficulty in using the typology system. They were able to find one LS type to correlate to the ER interpretation but were unable to perceive possible alternatives that would be congruent to the subject's personal convictions.

A summary of the above comments would be that the trainees in general failed to consider each ER separately on its own merit, use significant elements within the ERs to substantiate their positions, and understand the typology system established by Mosak (1971). They did however effectively use the generalized phrases to identify the subject's perception of "him/herself", "the world", and "others", albeit not in great depth.
DISCUSSION, LIMITATIONS, RECOMMENDATIONS AND CONCLUSIONS

The discussion of results of this study are organized into three broad themes: transcript comparison of anecdotal comments, identified central LS themes, and implication of the training procedure in ER interpretation; and then within these themes according to the research questions listed previously. Interpretation of results will be limited to those findings that this researcher considers most interesting and most important.

TRANSCRIPT COMPARISON OF ANECDOTAL COMMENTS

Common perceptions made from cognitive cues found in the ERs. The conclusions reached by the interpreters about each subject were quite similar, as shown in Table 1. The emotional overtones expressed by the subjects in the questionnaire serve as powerful cues to the experienced clinician and trainee alike. This stage of the interpretation of ERs, consisting of the phrasing of how the subject views him/herself, others, and the world, is commonly perceived although to varying degrees depending upon training and experience (Malamud, 1968).

From examining the interpreter transcripts it appears that the portion of the questionnaire that receives much of the attention comes from the "clearest scene" and "your
feelings during this scene". This would seem to validate earlier findings that emphasize the importance of identifying the clearest scene in a memory and the feeling associated with this moment (Dreikurs, 1952; Olson, 1979).

**Interpretation style of the interpreters.** Regardless of whether personal style favors the use of themes, metaphors, generalized phrases, headlines or typologies, it is important to use all the information provided in all of the ERs. Additionally, it is important to substantiate an interpretation using examples given from within the subject's own ERs. An examination of the results suggests the trainees failed to do this as extensively as the experienced clinicians.

**Reasoning process used by the interpreters.** Reasoning process appears to proceed from cue recognition to relationship formation to a tentative hypothesis which is confirmed, altered or dismissed through further examination of the ERs. Success in this process might be paralleled to the analysis of poetry or literature. The more well read and knowledgeable the critic the more comprehensive the analysis. The more experience with Adlerian theory and familiarity with imagery and symbolism the more adept the interpreter is in using the observed cues to analyze the relationships and synthesize a picture of the subject's private logic.

This appears to be the key to understanding the interpretive process; the degree to which all important cues
in an ER are recognized, evaluated and substantiated.

**Contrast of skill between experienced clinicians and trainees.** As the trainees initially possessed only rudimentary knowledge of Adlerian psychology and received only two hours training in ER interpretation, this researcher expected less competence in ER interpretation than that achieved by the experienced clinicians. This expectation was met by the trainees more superficial approach to the interpretation process. The trainees in general did not utilize all of the given ERs for their interpretation, they failed to reference their statements with examples from the text, metaphorical content was not delineated, and overall, they had less to say about each subject's ERs. It is important to recognize that trainee #1, the most experienced of the three trainees in background and knowledge, demonstrated a more comprehensive interpretation style in reference to using all of the ERs provided for each subject. All of the trainees lacked skill interpreting metaphors and validating their points with examples. The ability demonstrated by the experienced clinicians apparently comes after much more practice and exposure to ER interpretation. Exactly how much additional training results in improved interpretation ability is not clear.

**IDENTIFICATION OF CENTRAL LS THEME**

Reliability of using ERs to identify central LS theme. The data from Table 3 and 5 show that the three experienced
clinicians working independently could agree 9 out of 10 times on LS typologies developed from a subject's ER interpretations alone. This result is in agreement with the studies conducted by Ferguson (1964) and Colker and Slaymaker (1984). LS summaries rather than LS typologies such as those described by Mosak (1971) were used in the previously mentioned research. These would be comparable to the anecdotal comments described in the previous section of this study.

If the identified LS theme agreed upon by the experienced clinicians is taken as the criterion reference, the trainees were unable to successfully use ERs in arriving at a LS typology (see Table 4). While Ferguson (1964) and Colker and Slaymaker (1984) used a matching technique of original ER to derived LS summaries, no work has attempted to examine the progressive acquisition of skill at performing an ER interpretation and arriving at an identified LS theme. The question of how much and what kind of experience and training is necessary before trainees more closely approximate the skill demonstrated by experienced clinicians is an important one.

Table 5 shows more graphically than Table 2 the extent to which the experienced clinicians agree on LS typology. It emphasizes the importance of not limiting an ER interpretation to identification of a single LS theme alone. A number of central themes may describe an individual (Mosak,
1979) and may account for a certain degree of variability observed when evaluating the reliability of using ERs to identify this central LS theme.

Sources of variability between clinicians. Very little is reported in the literature regarding the ideal number of ERs necessary to yield a complete picture of an individual's lifestyle. Research has shown 3 ERs to be the minimum necessary to provide adequate information for a LS assessment (Verger & Camp, 1970; Kopp & Dinkmeyer, 1975). The optimum necessary to provide the specific information on an individual's lifestyle would vary from person to person with Ackerknecht (1976) suggesting seven and Papanek (1972) five to ten. While 3 ERs per subject was sufficient in most cases in this study it was not enough for interpreters to assess subject 8.

According to Adler (1931), if the first memory is an individual's earliest recollection it "will show the individual's fundamental view of life...(p.75). Mosak (1958) states that, "later recollections (when the individual is older) in a series may furnish details and specifications for generalized attitudes expressed in earlier recollections (p.304). Ackerknecht (1976) has characterized the first seven ERs as demonstrating present day attitudes, developmental trends, and the process of social maturation and cooperation. There have been no reports examining the significance of the earliest memory vs. early memories. The emphasis given the first memory by some clinicians might
possibly be due to their own training in ER interpretation. This source of variability would need further research to be clarified.

Where distinction between typologies is unclear error can occur. The typology descriptors for "victim" and "inadequate" are perhaps incomplete. According to the dictionary, a victim must be hurt or injured by some person or some circumstance and often hopes for a rescuer. An inadequate person is deficient or insufficient and often feels oneself to be the cause of his/her own problems. Confusion exists even in the names Schlimazel or Schlemiel where there is the juxtaposition of clumsiness (inadequacy) with being taken advantage of (victim). It is a very subtle difference which needs client feedback for determination. This feedback can occur if the ER interpretation occurs through the interview approach instead of by questionnaire.

Typologies from an Adlerian perspective are not classificatory schemes, but heuristic devices (Adler, 1956; Mosak, 1979). The ER content might be more meaningfully interpreted through synthesizing appropriate aspects of each of the pertinent identified themes to create a composite portraying the style specific to the individual (Lowe, 1977). If only one central theme is proposed by different interpreters it stands to reason that they might choose different themes, each one of which is important and representative of the individual's overall life style.
Clinical approaches are open to human error. Clinician oversight appeared to account for two errors in LS typology determination. With client feedback this could be less likely. From examining the transcripts and Table 2, it is apparent that without these two errors the inter-judge reliability of the experienced clinicians would have been higher.

Problems associated with life style typologies. There are no published reports investigating the extent to which different LS typologies occur in a given population. The reason that the LS themes of "control", "getter", "inadequate", "need to be liked", "victim", and "need to be right" appeared most often can only be speculated upon. Adler postulated the theory that all individuals feel in some way inferior to their surroundings and attempt to overcome this sense by striving for competence and security (Adler, 1958). This creates a vertical hierarchy where individuals view life as a ladder; always seeking to climb over those above and step on those below. The life styles which actively reflect this idea would be "control", "getter", and "need to be right". Life styles which passively reflect this perspective would be "inadequate", "victim", "baby", and "need to be liked". Further research is indicated inorder to substantiate this hypothesis.

Typologies are constructs useful in creating images to assist in the understanding of all individuals. It may be
that Mosak's system has gone too far in delineating behavior. The fourteen types described possibly compartmentalize behavior to such an extent that an individual may not be easily identified with any one type or style. This leads to a desire to further clarify and describe the themes so as to make the distinctions between them more apparent. Perhaps an alternate approach is more feasible. Instead of many types being proposed, a system with more general categories would adequately accomplish the instructional goal. Adler, for teaching purposes only, described an individual's method of interacting as either ruling, getting, avoiding, or useful (1935). More recently, Kefir (1971) presented the four "personality priorities" of pleasing, superiority, controlling, and avoiding (comfort). The value of a typology system comes from allowing a generalized classification which then can be shaded and detailed to more completely describe a particular individual. Mosak himself, in a paper on neuroses (1968), presented the idea that individuals possess convictions representing different central themes in varying proportions. He then reiterated the fact that themes other than the central theme exist for each person (1979). The future use of appropriate typologies to describe life style would appear to need further examination.

IMPLICATIONS FOR THE TRAINING PROCEDURE IN ER INTERPRETATION

The training procedure followed was moderately successful in providing the trainees with a basic ability to identify
the perceptual schema of the subjects from their ERs. This follows from examining the transcripts and noting similarities between the trainees' comments and those of the experienced clinicians.

Beyond this ability the trainees possess insufficient skills in interpreting ERs. The implications for training are clear. A longer time is needed to develop skills and to practice interpretations and receive feedback on accuracy. This training should emphasize the need to use all of the ERs provided per subject and to recognize repeated elements or apparently contradictory elements. Practice is needed in formulating statements reflecting subject perceptions along with supporting examples from the ERs. It is the use of examples which adds the element of completeness and reinforces the "guess".

Relating the ER interpretation to a LS typology appears to need an entirely different form of practice or training. It perhaps should not be attempted before an interpreter thoroughly understands the theme (I am..., others are..., life is...) or movement in the ERs.

An effective training model for ER interpretation would need to develop the appropriate exercises in the most effective order over the needed time necessary to achieve the skills that were lacking in the trainees in this study.

LIMITATIONS AND RECOMMENDATIONS FOR FUTURE RESEARCH

Limitations. The most apparent limitations of this study
are associated with the ERs themselves. First, and most important, the ERs were collected from the subjects through a questionnaire. This vehicle, while a tested approach, limits from the beginning the degree of information obtained through eliciting ERs from the subjects. Reference was made earlier to this factor (see Chapter 4). Secondly, the number of subjects who provided the pool of ERs was relatively small. The sample size would need to be increased to provide a basis for more confident conclusions. Finally, the number of ERs collected per subject was the minimum recommended by previous research. While this seemed to be sufficient in most cases, a larger number of ERs would allow more information against which to test hypotheses.

The training program lasted two hours. This was insufficient to adequately prepare the trainees in ER interpretation and delineation of life style type using Mosak's format. A longer training period with greater emphasis on identifying and using details within all three ERs is necessary. The use of examples from the ERs to corroborate interpretation was also weak. The training program did not sufficiently emphasize the transfer of information about the ERs into a typology choice. A revised training program for ER interpretation is provided in Appendix #5a.

Recommendations for Future Research. Consideration of related literature and examination of the results from this
study stimulate the following ideas for future research:

The primary goal of this exploratory study was to describe the interpretive process. This needs further clarification. The guidelines provided to all of the interpreters must be more specific about what cues are receiving their attention and what mental processes are occurring during their reading. This might take the form of specific questions or a modified method of responding to the subject ERs from what occurred during this research.

Superficially, it appears from this study that different interpreter style does not effect the outcome of the ER interpretation. This question needs further examination. Before establishing reliability of the technique it must be verified that different interpreter styles do not adversely affect the accuracy of the ER interpretation.

There is very limited research on the importance of the earliest memory compared to early memories in general. This question bears investigation to assist interpreters in placing appropriate emphasis on ER content to determine life style information. In addition, from results in this study and to complement the work by Ackerknecht (1976) and Papanek (1972), research is needed to correlate the accuracy of ER interpretation to the number of ERs used. This information would provide practitioners with a reliable guideline for using ERs with clients.

Based on the results in this study of inter-judge
agreement on LS identification, and as a complement to the research by Ferguson (1964) and Magner-Harris et. al. (1979), it would be important to repeat this pilot study using a larger subject population of ER prototypes to allow for statistical analysis of the results to provide added reliability and validity for this projective technique.

To increase the confidence in using LS typologies as representing individual life styles, more research is needed. This would take the form of investigating the nature of associated central themes, the presence or absence of possible central themes in different populations, and the general usefulness and applicability of typologies to ER research.

**IMPLICATIONS AND CONCLUSIONS**

Of the results generated by this study, two stand out for their importance to the research community, and three others for their practical implications.

In terms of research, inter-judge agreement amongst experienced clinicians has been tentatively demonstrated using ERs to designate LS themes using Mosak's typologies. This qualitative conclusion could be reinforced through a more quantitative study in the future.

Results shown in Table 5 demonstrate two reasons why more than one LS theme needs to be identified by interpreters when using a typology system. One reason is to allow for slight variation between interpreters in assigning importance to
information that is present in the ERs, and the other reason is to stimulate research in associated LS themes.

An important practical consideration is that reliability has been demonstrated even for the basically trained counsellor in accurately characterizing a client's private logic through the use of ERs. Consistent with this is the realization that more intensive training is necessary if the counsellor expects to use ERs to identify life style themes.

For the experienced clinician the results from this study tentatively demonstrate that the interpretive style used when interpreting ERs does not affect the outcome when Mosak's typologies are used. All approaches appear equal and effective when used by a competent practitioner for this purpose.

To the counsellor using ERs with a client, it is clear that the most effective interpretation occurs when accurate understanding of private logic is expressed through thematic statements of how the client sees him/herself, others, and the world. This is enhanced through additional comments on client apperception taken from the symbolism and metaphors found in the ERs themselves.
FOOTNOTES

BIBLIOGRAPHY


Attarian, P. J. (1978). Early recollections: Predictors of


APPENDIX 1

EARLY RECOLLECTIONS QUESTIONNAIRE

Date: Sex:

The purpose of this questionnaire is to find out what memories you can recall from your early childhood. This information is to be used in a study attempting to establish the reliability of using Early Recollection interpretation to identify Life Style theme. The responses are to be used for research purposes only and complete confidentiality is insured. Upon completion of the research all of the data is to be destroyed. You have the right to refuse to participate or withdraw at any time at your own discretion. The questionnaire should take approximately 30 minutes to complete. If the questionnaire is completed it will be assumed that consent has been given to participate in this research.

Please keep the following points in mind when doing this questionnaire:

1. The early memory should be from before 8 years of age and must be a specific incident, event, occurrence, or happening that you can remember. Early memories which describe incidents that occurred over and over again (example: "We used to do such and such...") are not true early recollections and, consequently, should not be written down.

2. Write down any early recollection that comes to your mind, even if you are not sure the incident actually occurred.

3. Write down the early recollections in the order that you
remember them. It is not important that the recollections be reported in their true chronological order.

4. Please give three (3) early recollections
5. For each memory could you please supply the following:
   Your approximate age when this incident occurred.
   Describe the memory in detail (this is especially important for the first memory).
   Which scene or part of the memory is most clear (stands out the most).
   Which part of the recollection seems most significant to you.
EARLY RECOLLECTIONS

1. Age:
Description: (use additional space on back if necessary)

Clearest scene:

Your feeling during this scene:

Most significant part of the memory to you:

2. Age:
Description: (Use additional space on back if necessary)

Clearest scene:

Your feeling during this scene:

Most significant part of the memory to you:

3. Age:
Description: (Use additional space on back if necessary)

Clearest scene:
Your feeling during this scene:

Most significant part of the memory to you:
APPENDIX 2

COMPLETED EARLY RECOLLECTIONS QUESTIONNAIRES

Subject: 1

SEX: Female

1. Age: 4 years

DESCRIPTION:
It was my 4th Birthday party. That day I was so excited. I was in our unfinished basement with a friend. I was rolling on a hula. I fell off and hit my head on the concrete. I started to vomit and felt awful. It was too late to cancel my party but I was really sick. All my friends arrived and I was in bed. I remember a girl gave me a doctors kit. All I wanted was my Daddy. He was golfing and I wouldn't stop crying 'til he came home. My mom called him and he came home. The party went on without me.

CLEAREST SCENE:
Crying in bed and wanting my Dad.

YOUR FEELING DURING THIS SCENE:
Upset about missing my party. Sad.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
Missing my Birthday Party.

2. Age: 5 years

DESCRIPTION:
I was going to the Black Cat Kindergarten. It was the last day before Xmas Holidays. The school had their own school bus. The driver drove me down the backlane and dropped me off. As I left he handed me the biggest candy cane I had ever seen.

CLEAREST SCENE:
Taking the candy cane.

YOUR FEELING DURING THIS SCENE:
Surprised and happy.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
That the nice bus driver had given me a surprise present.

3. Age: 5 years

DESCRIPTION:
My sister and I were having our hair perm by my mom. My mom had curled our hair and put the lotion on our hair. She told us to stay in the back yard and she would call us when it was time to rinse off lotion. We left the yard. I don't remember where we went, but awhile later Mom found us, she was so mad at us that I got a spanking with a hair brush and my sister got one also. We had very frizzy hair.

CLEAREST SCENE:
The spanking.

YOUR FEELING DURING THIS SCENE:
Sorry that we had left yard.
Subject: 2

PRIMARY
LIFE STYLE DESIGNATION: __________

SECONDARY
LIFE STYLE DESIGNATION: __________

Sex: Male

1. Age: 5 years

DESCRIPTION:

Lying in bed with my father and mother, with a very high fever. Because of this fever, I had a terrifying illusion:—The staircase at the end of the room had men who were part of an African safari, fighting off Lions with their bare hands. It seemed that the men were fighting a losing battle, and if they lost, it would mean that I would be confronted with the Lions.

CLEAREST SCENE:

Lions fighting men. Mother trying to calm me down with cool towels on the forehead.

YOUR FEELING DURING THIS SCENE:

Terrified.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:

Men were going to lose this battle and seemed to be doing so.

2. Age: 6 years

DESCRIPTION:

A photograph was to be taken of me sitting on a tricycle. I protested bitterly but to no avail.

CLEAREST SCENE:

sitting on the tricycle, making faces at the photographer.

YOUR FEELING DURING THIS SCENE:

I was furious. I did not want my picture taken.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:

I felt that I would get back at someone for this -- revenge.

3. Age: 6-7 years

DESCRIPTION:

It was winter with below zero temperatures. (approx. 10° below) I fell into water while playing with friends. I came into the house wet and frozen. -- Mother was furious. She had company and I walked in. I must have embarrassed her completely.

CLEAREST SCENE:

Mother stripping my clothes off me.--giving me a few choice words.

YOUR FEELING DURING THIS SCENE:

I was cold, hungry and embarrassed.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:

My pants were frozen solid and mother had difficulty taking them off. This increased her temper.
<table>
<thead>
<tr>
<th>Subject: 3</th>
</tr>
</thead>
<tbody>
<tr>
<td>PRIMARY</td>
</tr>
<tr>
<td>LIFE STYLE DESIGNATION:</td>
</tr>
<tr>
<td>Sex: Female</td>
</tr>
<tr>
<td>SECONDARY</td>
</tr>
<tr>
<td>LIFE STYLE DESIGNATION:</td>
</tr>
</tbody>
</table>

1. **Age:** 6 years

**DESCRIPTION:**
During my Grade 1 year, we had a Remembrance Day service on November 11th. I took a nickel to school to buy my poppy but on my way home from school, I lost it! For two hours, I searched through the snow on the route to the school for the poppy. It was dark and cold and I was in mortal fear that I would be in trouble for losing something I had paid a whole 5¢ for. Crying and upset, a "big girl"—she must have been in Grade 4 at least—asked me what was wrong. When I told her my story, she gave me her poppy and I was all excited to go home and show my mother my treasure—only to find, she was out in the snow looking for me because I was two hours late arriving home.

**CLEAREST SCENE:**
Being out in the snow during "dark time".

**YOUR FEELING DURING THIS SCENE:**
Lost, miserable, scared, upset, cold

**MOST SIGNIFICANT PART OF THE MEMORY TO YOU:**
The girl giving me her poppy.

2. **Age:** 5 years

**DESCRIPTION:**
At age 5, the local furniture/toy delivery truck arrived at our door and the man came and took away my tricycle. This was most upsetting situation—my means of transportation with the rest of the kids. Two days later, the same man arrived with a new doll carriage. We lived in a small house that did not have accommodation for both toys so the tricycle was traded in on the doll carriage.

**CLEAREST SCENE:**
The man taking off with my tricycle.

**YOUR FEELING DURING THIS SCENE:**
Sad, dejected, unloved

**MOST SIGNIFICANT PART OF THE MEMORY TO YOU:**
Being without a tricycle and having to be without a tricycle like the other kids.

3. **Age:** 6 years

**DESCRIPTION:**
When I was six, I went to an ice-cream parlour called the Blue Boy and had my first milkshake. It was served in the big aluminum container and that, plus a long straw, was too high for my short self to reach. I promptly knocked the whole mess over while trying to get onto my knees to drink it.

**CLEAREST SCENE:**
All my family mopping up my delicious milkshake.

**YOUR FEELING DURING THIS SCENE:**
Clumsy, hungry, sad.

**MOST SIGNIFICANT PART OF THE MEMORY TO YOU:**
Can't really say, but think I was about 17 before I ever ordered another milkshake!
My family and I were on our way home after visiting Neighbors. It was dusk and our mode of transport was a Bennet Buggy drawn by a team of horses. We were in our good clothes and as children were snuggled between our parents quite high in the rigg. I recall my baby sister in mother's arms and dad driving the horses. The rumble of the buggy and my parents conversation were relaxing. All of a sudden the horses were startled and we were into a runaway situation.

CLEAREST SCENE:
My Dad being dragged by the lines ahead of the disconnected rigg. Expression of concern from my mother. Riding home in a car and sitting in the front seat.

YOUR FEELING DURING THIS SCENE:
Fear for my Father. Confused over my mother's panic. Safe in the car.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
Good safe feeling in the car after the confusion.

2. Age: 7 years

DESCRIPTION:
Sliding on rubbery ice with a group of kids during recess and falling through the ice into cold water. I was walked to the school house where I changed into the teacher's (lady) slacks, a friend's jacket and sat over the furnace register. Felt humiliated at having my long Johns hanging in front of my class friends. The teacher took me home on her horse. Both of us rode the same horse. I was uncomfortable about this. I recall my mother serving the teacher tea and the teacher's pleasant conversation with my mother.

CLEAREST SCENE:
All vivid: Falling in, sitting over the register, riding on horse with teacher.

YOUR FEELING DURING THIS SCENE:
Dreadful shock and helplessness when I fell in the water.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
The concern and kindness the teacher had for me.

3. Age: 7 years

DESCRIPTION:
Coming home from school and realizing something was dreadfully sad because my Grand Father was dying from a stroke he experienced. Going to his sick bed and being alone with him. All he could do is turn his head, looked at me with glazed eyes and desperately moaned.

CLEAREST SCENE:
My Grand Father looking at me in a helpless manner and moaning.

YOUR FEELING DURING THIS SCENE:
Helpless myself and confused because I enjoyed many experiences with him and he couldn't relate in my terms.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
The expression of my grandfather's love for me even though I didn't understand it at the time.
Subject: 5

LIFE STYLE DESIGNATION: 

Sex: Female

SECONDARY LIFE STYLE DESIGNATION: 

1. Age: 6 years

DESCRIPTION:
Grade one. We had spent a lot of time making little figures, trees, houses, etc. with paper and coloring them to make a town on the large sand table at the back of the room. The teacher asked me and another child to choose the best ones and make the town. I tried really hard to pick the best ones and threw the others in a green garbage can placed right beside the table. After we had been working happily for awhile the teacher came back and got mad at me and sent me to the cloakroom. I went back there alone, scared and bewildered. I couldn't understand what I had done to make her so angry.

CLEAREST SCENE:
Quite happily picking the people and houses to make a nice town.

YOUR FEELING DURING THIS SCENE:
Total confusion. I had been doing what I was told and the teacher had gotten mad at me for it.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
It seems to me that I was learning not to try my best. I didn't understand about including kids that couldn't do as well as I—but that wasn't what I had been asked.

2. Age: 3 years

DESCRIPTION:
My mom sent me to the Pussy Gat Playschool which I loved. The school was in the basement of the teachers house and she was a piano teacher as well. One day we had to be tested for perfect pitch to see if we would be future music students as well, I guess. We all had to wait out in the hall, outside the piano room to wait our turn. When I went in she had us turn our back to the piano and sing intervals as she would play the first note. I did them all correctly.

CLEAREST SCENE:
Looking at the pannelled wall and listening to the notes on the piano.

YOUR FEELING DURING THIS SCENE:
I was a little nervous and excited waiting for my turn and then really happy that my teacher was so pleased with my performance.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
I think my happiness at having done so well.

3. Age: 8 years

DESCRIPTION:
I had gone to bed as usual one beautiful summer evening but couldn't sleep. I finally got up after tossing and turning for ages and wrapped my quilt around me and came out of the bedroom. I was expecting to be marched right back to bed, but instead of doing that Mom and Dad told me to come with them. They took me out on the front porch and wrapped me up in the quilt. We sat for awhile looking up at the stars which were beautiful. Then I went back to bed to sleep.

CLEAREST SCENE:
Sitting on the porch with my parents beside me looking up at the beautiful night sky.

YOUR FEELING DURING THIS SCENE:
I felt quite grown up to be allowed to stay up past my bedtime and very warm and secure.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
How surprised I was to be allowed to stay up and how my parents seemed to understand about my not being able to sleep.
Subject: 6

LIFE STYLE DESIGNATION:

Sex: Male

SECONDARY

LIFE STYLE DESIGNATION:

1. Age: 2-2½ years

DESCRIPTION:

Rainy summer morning in a small town with one main street that has busy vehicle traffic connecting it to nearby villages. Mud splashing in to the air as trucks and cars going by. I am sitting in the doorway of our house on that street covered only by a very light white night shirt, wondering where my mother is and watching the traffic and the mud flying.

CLEAREST SCENE:

Trying to pull my night shirt over my toes to be covered completely. It is too small and if I pull the front, the back slips up. Trying to squat as small as I can to make the shirt fit.

YOUR FEELING DURING THIS SCENE:
Cold and alone. Where is my mother?

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
I cannot stretch the shirt, can not make it fit.

2. Age: 2½ years

DESCRIPTION:

Visiting relatives in a small farming village on a hot fall Sunday afternoon. All the men relations (about 10 of them) sitting outside in the shade of a tree in their Sunday best and drinking wine and talking. All the women (8-9 of them) sitting in another group in the shade brushing and spinning hemp for rope and weaving string. (Not knowing any better use for the plants) Doing a job that allows for social gathering with out being idle.

CLEAREST SCENE:

Hemp twine and hemp hanging in the hot afternoon air mixed with the smell of wine and the sound of laughter. Being thrown up in the air repeatedly by older cousins in their late teens and wondering when I will hit the ground.

YOUR FEELING DURING THIS SCENE:
Very happy and feeling secure. Time seems to stand still but still wishing that we would not have to go home ever.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
The contrast between the cool relaxing shade with the smell of wine and noise of laughter compared to the suffocatingly hot sunny areas.

3 years

DESCRIPTION:

Being in a busy railway station with my Aunt who just got me a jacket with an outside breast-pocket. She is giving me a few coins and instructions to go to a counter and ask for a candy bar.

CLEAREST SCENE:

Getting the candy bar and putting it in my outside breast pocket and toddling back to where my Aunt is waiting for the train.

YOUR FEELING DURING THIS SCENE:
Feeling very grown up because everybody can see that I have a breast pocket that is bulging because of the candy bar.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
Going back to my Aunt and tripping over my own feet and losing the candy bar.
Subject: 7

LIFE STYLE DESIGNATION:

Sex: Female

SECONDARY LIFE STYLE DESIGNATION:

1. Age: 5 years

DESCRIPTION:
Falling from 'monkey bars' on swing set and breaking my arm. I was begging, then demanding that my sister catch me as I hung by one arm from the bars -- looking down to the ground. I warned her "I'm going to break my arm" but she didn't listen - I fell on my left arm - it broke in 3 places and I barely cried. I was so angry I just kept saying "I told you I would break my arm." I also remember being in hospital overnight and they kept waking me up.

CLEAREST SCENE:
Looking down to ground my arm trying to cling to bar as it begins to twist around and I begin loosing my grip.

YOUR FEELING DURING THIS SCENE:
fear

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
I think its funny that I vented my pain and fear in anger rather than crying and allowing myself to feel hurt.

2. Age: 5 years

DESCRIPTION:
rehearsing for and going to studio to do square dancing (on T.V.) with kindergarten class.
-remember the intensity of learning words and steps in classroom
-my dress meant everything to me - it was beautiful
-I would especially watch a Spanish Speaking classmate as I was fascinated by her beautiful dark complexion and jewelry (pierced ears-tiny necklace)

CLEAREST SCENE:
-Acting out mntions and singing O"Go in and out the windows"

YOUR FEELING DURING THIS SCENE:
bliss and accomplished satisfaction

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
I was acting with independence, achievement, and feeling creative-singing and dancing. I was extremely proud.

3. Age: 6 or 7 years

DESCRIPTION:
Lying in a hospital room with several other people. Doctors and nurses around as well as my mother. I remember them putting the tubes into my urethra and the excruciating Pain. I felt very sick and helpless but people were kind and loving I didn't really understand what was going on.

CLEAREST SCENE:
how I felt when they were inserting tubes

YOUR FEELING DURING THIS SCENE:
horrendous pain and fear

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
The contrast of feelings - simultaneous pain and love/warmth from those around me.
Subject: 8

LIFE STYLE DESIGNATION: __________

Sex: Male

SECONDARY LIFE STYLE DESIGNATION: __________

1. Age: 7 years

DESCRIPTION:
I was in the habit of kissing my mom, before we left for school. During this period I was in love with my Grade two teacher. One day, out of habit (or wanton desire) I pushed my lips towards the Gr. 2 teacher, as I was leaving school, as if she was my mom.

CLEAREST SCENE:
PUSHING my lips toward the teacher as I was leaving school.

YOUR FEELING DURING THIS SCENE:
I was oblivious to the fuss I was creating among the other students.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
I turned scarlet, and was very embarrassed.

2. Age: 6 years

DESCRIPTION:
While exploring the neighborhood one day my older brother tripped on some lumber and landed on a concrete spike.

CLEAREST SCENE:
My brother falling into the open pit.

YOUR FEELING DURING THIS SCENE:
fear.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
The length of the spike.

3. Age: 4 years

DESCRIPTION:
My older brother was crossing the street in front of grandma's house when he was struck by a car and dragged ½ block.

CLEAREST SCENE:
Running out of the house to see what had happened.

YOUR FEELING DURING THIS SCENE:
I felt a loss, as if he was already dead.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
When they brought him into the house bleeding.
Subject: 9
Sex: Female
1. Age: 5 years

DESCRIPTION:
I was walking home from school, alone, hurrying because I had to go to the toilet! Suddenly -- it was too late-- I messed my pants! At that moment I heard footsteps running from behind and a girl from the neighborhood caught up with me and said "wait for me, I'll walk with you." She was 10 or 11, and I really admired her, and was flattered that she wanted to walk with me -- but, I didn't want her to know my predicament! I survived the walk down the hill to my house, but suffered agonies in the process! My father was at home, and stood me on a sheet of newspaper in the open kitchen doorway to wash me; that, however, didn't embarrass me at all!

CLEAREST SCENE:
The moment when this girl caught up to me and began to walk beside me.

YOUR FEELING DURING THIS SCENE:
Acute embarrassment and discomfort.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
Sorry, I really don't know.

2. Age: 3 ? years

DESCRIPTION:
During the war, in England, we had frequent air raids. I remember one such time in the late winter afternoon, I think because it was almost dark, and instead of going directly to the air raid shelter, I went first to the other end of the garden to collect the 3 baby ducklings we kept there in an old bath tub. My mother was angry and shouted at me, but I had no sense of fear or danger at the time.

CLEAREST SCENE:
Trying to hold all 3 ducklings at once, as I knew I wouldn't get a chance to make a second trip to their pond!

YOUR FEELING DURING THIS SCENE:
Mild panic, as I knew I had to hurry; but it was fear of my parents anger, not fear of the danger of bombings.

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
The total absence of any sense of danger.

3. Age: 6 years

DESCRIPTION:
Walking with my mother and another woman, on our way to visit my aunt. My mother was talking about the birth a few months earlier of my sister. I overheard some of her remarks, and as a result I imagined babies were born in plastic bags, filled with water, and that the top of the bag had to be cut open with scissors very quickly, or the baby would drown.

CLEAREST SCENE:
The clearest part of this incident is actually the visual memory of the alleyway along which we were walking, beside railway tracks. I can still see the stones, patches of grass and a single cement step, and feel the warmth of the sun.

YOUR FEELING DURING THIS SCENE:
Great curiosity!

MOST SIGNIFICANT PART OF THE MEMORY TO YOU:
It's interesting, looking back, to note that I never even considered asking my mother, then or later, any questions about childbirth.
Subject: 10

Primary Life Style Designation: __________

Sex: Female

Secondary Life Style Designation: __________

1. Age: 4 years

Description:

I remember a ballet class. Perhaps I had been 2 or 3 times already, I don't
remember. The thing I remember most is the new dark green ballet dress my
mother had made for me. All the children had the same outfit, and we were
learning how to point our toes. The building was old and smelled old. I
didn't know anyone in my class.

Clearest Scene:

Standing in front of the mirror, facing South, in my new green ballet dress. My
mother was at the back of the room watching the class.

Your feeling during this scene:

I was nervous because I didn't know any of the children, but felt important be­
cause I had the required green dress.

Most significant part of the memory to you:

Probably the fact that it may have been the first class of any sort I had attended
so it has stayed in my mind.

Description:

I remember I had just gotten a new bed. I suppose I was in a crib before this
time. My mother was washing windows outside. I think she had a scarf on her
head. I was crying. My mother suggested I was tired, and would tuck me into
my new bed for a nap.

Clearest Scene:

My mother kneeling down washing a basement window from the outside.

Your feeling during this scene:

I had nothing to do. I wanted some attention. I remember crying. I didn't
want my mother to wash the window.

Most significant part of the memory to you:

When my mother suggested the nap, the fact that she was going to come and cover
me up and make comfortable was a good feeling. Maybe because it was a new bed
I was excited about sleeping in it.

Description:

We had a back lane behind our house, and 2 doors down on the opposite side of the
lane, was where my friend lived. In order to get to her house I had to pass a
home with a dog. The dog was always in the backyard - fenced in, but barking.
I was always afraid of dogs, especially this one. I would run past the house,
screaming, and fell on the gravel grazing both my knees.

Clearest Scene:

Running as fast as I could, with the dog at my heels, screaming.

Your feeling during this scene:

Absolute terror that the dog would bite me.

Most significant part of the memory to you:

I don't remember if I was afraid of dogs before this time, but after this I never
got over the fear. I was attacked by a dog as well in my early teens.
APPENDIX 3

LIFESTYLE

Harold H. Mosak

An Individual's Life-Style (Lebensstil), his "style of acting, thinking and perceiving," constitutes a cognitive framework within which he selects the specific operations which enable him to cope with life tasks. It expresses the central theme through which his behavior can be understood. While he may not be completely aware of his lifestyle, he acts congruently within this apperceptive scheme, and we can deduce his lifestyle through observing his verbal and nonverbal behavior. The lifestyle forms a unifying principle, a gestalt, to which behavior is bound in accordance with the individual "law of movement". Through this framework, developed early and remaining fairly constant throughout life, an individual interprets, controls, and predicts experience.

Since the lifestyle is a subjective view of self in relationship to life, conclusions arrived at through "biased apperception" contain fictional elements. The individual, however, may persist in assuming that only under the conditions held in the lifestyle can he adequately cope with life tasks and find his place in life. When life puts him to
the test, he frequently finds himself mistaken. He may then resort to behavior which he presumes will facilitate the evasion of life tasks, provide an excuse for that evasion, and protect his self-esteem. Both constructive and nonconstructive behavior can emanate from the lifestyle convictions, and we cannot predict which behavior will coincide with a given lifestyle. We can speak only of more or less probable selections of behavior.

Probable behaviors associated with commonly observed lifestyles may be described as follows:

1. The "getter" exploits and manipulates life and others by actively or passively putting others into his service. He tends to view life as unfair for denying him that to which he feels entitled. He may employ charm, shyness, temper, or intimidation as methods of operation. He is insatiable in his getting.

2. The "driver" is the man in motion. His overconscientiousness and his dedication to his goals rarely permit him to rest. He acts as if he wants to "it" (whatever it may be) completed on the day he dies. Underneath he nurses a fear that he is "nothing", and his overt, overambitious behavior is counterphobic.

3. The "controller" is either a person who wishes to control life or one who wishes to ensure that life will not control him. He generally dislikes surprises, controls his
spontaneity, and hides his feelings since all of these may lessen his control. As substitutes he favors intellectualization, rightness, orderliness, and neatness. With his godlike striving for perfection, he depreciates others.

4. The person who "needs to be right" elevates himself over others whom he arranges to perceive as being wrong. He scrupulously avoids error. Should he be caught in error, he rationalizes that others are even more wrong than he. He treats right and wrong as if they were the only important issues in a situation and cannot tolerate ambiguity or an absence of guidelines.

5. The person who "needs to be superior" may refuse to enter a life arena where he will not be seen as the "center" or the "best". He may devote himself to socially nonconstructive endeavors - achieving the record for number of days of underground burial. If he cannot attain superiority through being first or best, he often settles for being last or worst.

6. The person who "needs to be liked" feels required to please everyone all the time. Particularly sensitive to criticism, he feels crushed when he does not receive universal and constant approval. He trains himself to read other people carefully in order to discover what might please them and shifts from position to position in an attempt to please. He sees the evaluations of others as the yardsticks of his
worth.

7. The person who "needs to be good" prefers to live by higher moral standard than his contemporaries. Sometimes these standards are higher than God's, since he acts as if God will forgive trespasses that he, himself, cannot. This goodness may serve as an instrument for moral superiority so that he may not only elevate himself over others but may actually discourage the "inferior" person, a frequent device of the "model child" or the alcoholic's wife.

8. The person who "opposes" everything life demands or expects of him rarely possess a positive program in which he stands for something. He only knows he is against the wishes or policies of others. He may behave passively, not openly opposing but merely circumventing the demands of others. "Mother deafness" is not uncommon in children of this type.

9. Everything befalls the "victim" sometimes called the schlimazel. Innocently or actively he pursues the vocation of "disaster chaser". Associated characteristics may be a feeling of nobility, self-pity, resignation, or proneness to accident. Secondarily, he may seek the sympathy or pity of others.

10. The "martyr" is, in some respects, similar to the "victim". The "martyr" also suffers, but whereas the "victim" merely "dies", the "martyr" dies for a cause or for a principle. His goal is the attainment of nobility, and his vocation is that of "injustice collector". Some martyrs advertise their
suffering to an unconcerned audience, thus accusing them of further injustice; others enhance their nobility by silently enduring and suffering.

11. The "baby" finds his place in life through charm, cuteness, and the exploitation of others. Often his voice is high pitched, and the intonation and meter of his speech is childlike. Often he has been the baby in his family constellation, but this is not a necessary condition.

12. The "inadequate" person acts as if he cannot do anything right. Through his default, he indentures others as his servants. He may be clumsy or awkward; he may limit his activities to those few where he is certain he will succeed; he may fail whenever responsibility is given him. Since his behavior proclaims his inferiority, he is the paradigm of the inferiority complex.

13. The person who "avoids feelings" may fear his own spontaneity which might move him in directions for which he has not preplanned. He holds the conviction that man is a rational being and that reason can solve all problems. He lacks social presence and feels comfortable only in those situations where intellectual expression is prized. His most valued techniques are logic, rationalization, intellectualization, and "talking a good game".

14. The "excitement seeker" despises routine and repetitive activities, seeks novel experiences, and revels in commotion. When life becomes dull, he stimulates or provokes it in order
to create excitement. He requires the presence of other people and often places himself in league with others on whom he can rely to assist him in search for excitement. Some excitement seekers, however, do not involve others and find excitement through fears, rumination, or masturbation.

Since the individual is holistic, his lifestyle may be assessed at any point - through either past or current behavior - and through a variety of behavioral manifestations, gestures, language, early recollections, or life narrative. Some Adlerians who do a formal analysis of a client's lifestyle collect information concerning his family constellation - birth order, sibling relationships, achievements and deficiencies, parent-child relationships, parental relationships, and family climate. To understand his current outlook and goals the client's early recollections are interpreted. The goal of this diagnostic activity is to elicit the pattern of living - the lifestyle.
APPENDIX 4

INSTRUCTIONS FOR THE INTERPRETATION OF EARLY RECOLLECTIONS

1. Insure that you have available a tape recorder along with the supplied tape cassettes.
2. Read through the 3 ERs of the first case study.
3. Formulate your ideas as to the main themes, significant representations and patterns for this person.
4. Indicate which case number you are doing and record the above thoughts along with your Life Style choice, and reasons on the tape cassette. You may use the number from the list of available possibilities from Mosak's article.
5. If you are unsure of the Life Style type record your best approximation as the primary designation and give one or two others as your secondary decisions.
6. Indicate these decisions on the actual case study sheet and continue to the next subject's ERs.
APPENDIX 5

OUTLINE OF THE TRAINING PROGRAM IN ER INTERPRETATION

1. **Introduction to Early Recollections.** Early memories reflect a person's present view of themselves and the world. They are different from a report (information they have been told and cannot actually visualize) and from incidents that occurred repeatedly. They have happened to the subject before the age of 8 years.

2. **Information on how to elicit ERs from clients.** This involved learning how to ask for ERs, getting enough detail, selecting the most poignant moment and the feelings associated with this moment.

3. **General information on ER interpretation.** ERs are often negative; rarely positive or existential. The first ER given is generally the most important in terms of indicating lifestyle. Remember that all aspects of the ER are selectively remembered for their importance to us today.

4. **Interpretation process.** The ERs should be examined first to determine what theme is being expressed and secondly to identify specific details present.

   The themes fall into six different types which indicate attitudes about either my self or my world. These take the form of statements such as "I am ...", "I cope with problems by ...", "I interact with others by ..." and "Life is ...", 
"the Ideal life is ...", and "the Dangers in life are ...".

The specific details to recognize are that specific people mentioned are prototypes of people in general (gender is often a key point), the stance of the subject (active participant or passive observer) is important, the place or context of the recollection (open or closed spaces, people present or absent, etc.) is valuable, relationships to others such as smallness, looking down on others, feeling weak or strong compared to others has meaning, and any great amount of detail or colour sense can represent creative, artistic or idealistic attitudes. Any patterns found between ERs increase the likelihood of that particular element being important to the individual.

It is important to examine each ER separately for themes and details and then to integrate all of the information for a complete interpretation. This is presented to the client in the first person to add a sense of ownership and modified together to come up with a final acceptable version.

5. Practice session using sample ERs. After the above information was given and discussed a number of sample ERs taken from Olson (1979) were used to practice skills. This continued until each trainee was able to consistently identify the major themes and some of the specific details present.

6. Assignment of LS theme from Mosak (1971). The 14 types elucidated by Mosak were read over and compared to the
interpretations derived from the above sample ERs. This process was done briefly and without any method to check accuracy of theme assignment.
REVISED TRAINING PROGRAM IN ER INTERPRETATION

This revised training program in ER interpretation originates from the results observed in this current study. A longer period was thought to be necessary (4-7 hours) coupled with more extensive practice and feedback sessions.

Before any training is initiated it is important to have the trainees read some specific Adlerian references on private logic, personal goals, and life style (Adler, 1958; Dreikurs, 1967; Mosak, 1977; Shulman, 1973). This will prepare the trainees for an introduction to what early recollections are and why they are important. The steps one and three in the previous program would then remain essentially the same.

In teaching trainees the technique of eliciting ERs from clients the process would need to be lengthened. A technique similar to that developed by Kopp and Der (1979) should be used where specific questions are asked which produce more elaborate, complete and richer ERs. The trainees should practice this technique with each other, recording the results for later analysis.

The crucial stage involving the interpretation process should last from 2-4 hours. The approach would be similar to that given in Appendix 5 (step 4) with these additions:
1. Begin using written samples of 3-5 ERs in a set.
2. Go through each ER separately giving the major theme ("I am...", "Life is...", etc.) and provide specific examples for why you made this decision.
3. Note aloud or list the different metaphors or representations found in each ER. Compare individual observations amongst trainees inorder to increase their level of cue recognition.
4. Make overall statements about each set of ERs putting together the repeated themes and the specific details. Again it would be important to use examples from the ERs.
5. Finally, the trainees should practice this process using each other. This will test out their interpretations and allow them to receive feedback inorder to modify or adjust their perceptions.

This approach should encourage the trainee to be a more astute observer and user of the vast array of information provided in ERs. The primary weaknesses found in the trainees in the current study were their lack of examples, ineffective use of metaphors, and only partial use of all of the provided ERs.

The last step in the training process would be to familiarize the students with typologies in general and Mosak's system (1971) in specific. This should take between one and two hours. The time would be spent reading, discussing and understanding how each "type" encapsulates a
feature of life style. The previously used samples of ERs would be re-examined with this added perspective and elements in the ER would be related to features in the typologies. Mosak, Schneider, and Mosak (1980) have a good workbook with a number of sample ERs with their "types" identified. These should be used in practice sessions to develop skill in this aspect of ER interpretation.

The suggestions above compensate for the observed deficiencies found in the trainees performance in this study. The degree of success of this program must await future implementation.
APPENDIX 6

TRANSCRIPT OF INTERPRETER COMMENTS

Cl on subject 2:

The first ER has a sense of inadequacy; being horizontal; little and with parents. The illusion carries fear and loss of control of own fate. The world is a jungle. Men fight with bare hands (not properly equipped) the lions of this world. There are two issues here: control and inadequacy.

In ER two the photograph is a means of being recorded for posterity. It is a public display; no control. There is a high amount of anger and revenge. It is a question of entitlement. I can get even if it doesn't go my way.

The third ER shows the client subject to the exigencies of nature. When I am cold and wet, I get blasted. There are many active verbs: protest, revenge, frozen, furious, embarrassed, etc. A person with strong emotional movement. Life is more than people can handle—even mom. He also tries to indenture a number of others, even mom; this is typical of inadequacy.

C2 on subject 2:

I'm vulnerable. In order to have a place I should be looked after, or people should be concerned about me. Life
is dangerous: men are weak; women are strong, know what to do, are overpowering. I need women to look after me. It is wrong to embarrass others, from third ER, possibly weak.

Control-I should be in control but I can't. Possibly a bit of inadequacy. Not wanting photograph of me-I try to control life but there's no possibility, others take over. The only way I can control life is to have women look after me; on my own others are in control.

C3 on subject 2:

Victim: I saw victim in first plus rebellion and revenge in the second. Also victim in the third.

Inadequate: Feelings of inadequacy in the first and the third ER. "I am unable to stave these men off". Falls in creek and gets in trouble.

Excitement: A random shot, possibly not valid.

T1 on subject 2:

In the first ER, others are nurturers and potentially inept protectors. The world is terrifying and a battleground and I am potentially alone (one fighter).

The second ER has others disregarding my needs and receiving my fury. The world is a place of unfair expectation and I am vengeful and non-cooperative. A passive resistor.

In the third ER, others are inept protectors or minimal
caretakers. The world is harsh, cold and dangerous and I am a source of embarrassment and shame. I am inadequate to care for myself.

A opposer, getter (gets mom in service through inadequacy).

T2 on subject 2:

Life opposes me-life is a struggle. I resist in a passive manner when people are against me. He constantly seeks revenge without doing anything to obtain it.

Opposer with examples in all three ER. In first, men are struggling against lions and losing. I can just lay there and be terrified and others comfort me. In the second, He just sat there upon being photographed but thought about revenge. In the last he is somewhat glad that parents were frozen and this increased mom's anger.

T3 on subject 2:

When I am scared mom helps me out. When I get angry I take action myself. When I get into trouble mom helps me out. I can activate her.

C1 on subject 3:

A classic victim. In the first ER she lost the poppy and looking in the dark and cold. Full of fear and then rescued. The clearest scene is snow but most significant
part is being given the poppy. This excitement is dashed. All the emotions are about being lost, miserable, upset, etc. except the one point of excitement. Life is an overwhelming experience.

In the second ER she experiences the loss of the tricycle-no control. The emotional content is sad, dejected, unloved, and helpless. In the third ER, again, even while doing the right thing, I feel clumsy, hungry and sad.

Life is one successive mess after another. Things I want are beyond my own reach. Overall there is a sense of victimization; getting, too (doll carriage and new poppy). To be liked is very weakly present.

C2 on subject 3:

General scenes: (1) I am careless, I should be careful. People are helpful. When one does wrong women or others are concerned. (2) I am helpless. In order to have a place I should be like others. Men are in control. Others decide important things in life and I accept. (3) I am small and careless. In order to have a place I should be taller, bigger.

Inadequate; The common theme in all: first, losing poppy and even gone from home too long; second, others in control, I am out of control; third, being small, inadequate and careless and missing out on special things.
C3 on subject 3:

Getter: Significant part of first ER is someone "giving her the poppy".

Victim: Sense of victimization - upset and unloved. The loss of the tricycle.

Driver: Some of the driver in first ER, never rests in pursuit of goal. She is overly ambitious; in the last one, everything's too big for her; she tries and goofs up.

Wanting to be right: Wanting to know the rules.

Tl on subject 3:

First ER: Others are helpful givers; concerned with me and my things or potential punishers, godlike, authorities. The world is full of elusive treasures and I am unworthy and without the treasures. I show off; use being upset to advertise my helplessness.

Second ER: Others are concerned with and in control of my things. The world is limited, possibly for treasures and requires a trade off. I am unloveable without my things and in a down place.

Third ER: Others are concerned with my goodies; the world is limited, possible for treasures and requires a trade off; I am a messmaker coming from a down place.

The subject is a getter, concerned with getting and doesn't feel entitled. Victim: feels unworthy.
T2 on subject 3:

The tape did not record this one report.

T3 on subject 3:

I had a big responsibility but I blew it again. I can't do it right; others help me out when I blow it. Life is very unfair and hard to cope with because I am so clumsy and unable to do it right. Inadequate.

C1 on subject 4:

First ER: A common scene of control; a runaway situation. You are proceeding comfortably down the road of life in company of loved ones when suddenly things go out of control; even mom is concerned.

Second ER: Unpredictability and loss of control.

Third ER: Facing death, the ultimate loss of control. He feels helpless and confused.

Definitely a controller. The secondary themes would be a sense of helplessness (I go along for the ride) equal to inadequacy and to be liked; present in a negative way as a sensitivity to criticism.

C2 on subject 4:

First ER: I am safe and content. In order to have a place, I should be close to others. At the end it is possibly the beginning of another ER. I am helpless which is
also present in the next two ERs.

Second ER: I am helpless. In order to have a place I should look nice, respectable or appropriate. Women are kind and helpful. Women or people are interested and enjoy one another.

Third ER: I am helpless and concerned. Life is confusing. There is an element of being not in control.

Control: life is full of surprises; first, people out of control; second, he is out of control; third, control, confused and helpless, nothing he could do.

Much less than first theme is (1) to be liked; in the second ER he is feeling uncomfortable and being embarrassed; and (2) victim; life was perfect and then things go bad—what can you do. You fall into the water—what can you do. Remember with grandfather and poor me I can't do anything here either.

C3 on subject 4:

All the ERs represent some out of controllness, helplessness: the runaway situation and the last ER where one feel helpless and confused.

To be liked: not strong but with teacher a need to be liked; grandfather—a nice snuggle with parents in first ER.

T1 on subject 4:

First ER: Others are protectors and appear to be in
control but helpless in the face of the unexpected. The world is basically comfortable but full of unexpected, potential danger. I have a place quite high and in front center—a star.

Second ER: Others are protectors and caretakers of me. The world has unexpected shocks and I am helpless in the face of the unexpected.

Third ER: Others are concerned with me even on their deathbed. Others have limited power and are helpless. The world strikes people down and I am helpless in the face of the world.

The themes are superior and victim.

T2 on subject 4:

Life is full of unexpected accidents and sudden shocks. Bad things are always coming along, often scary. I cope by getting others to comfort and make me feel safe. Theme is the victim.

T3 on subject 4:

I like to be warm and safe and comfortable but life gives me startling experiences which leave me helpless. This means situations that I do not have any control over. Seeing that I can do nothing I am resigned to the fact that life is like that. Theme is victim.
Cl on subject 5:

Overall impression is the need to be right, not superior. But just be right and have others be wrong.

First ER: I select and those not measuring up go into the garbage where they belong. Different standards from me are bewildering and confusing.

Second ER: Delight in doing it perfectly. No comparisons, just me doing it up to a standard.

Third ER: I am accepted as an adult.

Themes are right; to be liked a weak second (from teacher not liking my work) and no third theme seen.

C2 on subject 5:

First ER: In general I am confused. In order to have a place I should do the right thing or please others. People are confusing and not clear. I do wrong when others are unclear.

Second ER: I am happy. In order to have a place I must do things right. Life is exciting and people support and are interested in me when I do the right thing. Possibly an element of needing to be best compared to the other kids, etc.

Third ER: I am content or special. I have a place when I am accepted for what I am. People are understanding and accepting. The world is interesting and exciting.

Themes are: need to be liked (when I do the right
thing), to be right (others are even more wrong than me), and superior.

C3 on subject 5:

First ER: Right away I see the need to be right, because of the injustice of the thing. Possible the need to be good because she thinks she did everything right and everybody else go mad.

Second ER: We see the element of superiority-the center best-This might be what is confusing me with moral superiority.

Third ER: She is surprised her parents are so fair-he denigrates them.

The final decision for the theme is to be right because "I was correct" in the first ER and I was surprised that parents did what was correct in third ER and in the second ER I got them all correct. The other possible themes might be superiority and to be good.

T1 on subject 5:

First ER: Others are makers, doers, rule setters, and encouragers/discouragers. The world is unclear and has unreasonable expectations and I am cooperative, a pleaser, evaluator and a judge.

Second ER: Others are encouragers (of my independence) and testors and evaluators. The world expects perfection in
performance and I am a pleaser.

Third ER: Others accept and comfort me and are unpredictable with respect to their expectations. The world is a place of beauty and I appreciate beauty and expect/look for approval.

The themes are: (1) to be liked, focused on others expectations and approval; (2) to be right, importance to perform right; and (3) to be superior, rationalized errors through moral superiority.

T2 on subject 5:

You have to be right. You do the right thing to seek approval of others, especially authority figures. I cope by doing the right thing and seeking approval and the person who is criticizing me is even more wrong.

T3 on subject 5:

I want to do the right thing and I get very confused when others don't understand me. I don't think that's fair.

I like to be put apart because it is important that others approve of what I do.

I like it when mom and dad understand me as if I were a grown up like them.

It is important to please other people.

Cl on subject 6:

First ER: "I can't make ends meet" is body language.
The feeling is different from the action-He doesn't fit. Scene has a lot of action and he is sitting. He is an observer. I don't fit, I'm outside looking in.

Second ER: An artistic person from the colours and descriptive language. A very companiable atmosphere. He is the center of action but not a doer. My life is full of marked contrasts; sex roles seem stereotyped and segregated.

Third ER: Women are the workers and the providers and give the tasks to do. I am small and incompetent and I don't fit. I enjoy being the center of attraction and I am a good observer.

The themes are baby; inadequate (I also mess up); victim and a poor fourth is getter.

C2 on subject 6:

First ER: I am small and alone. In order to have a place I observe exciting things. The world is exciting. Women should be near by.

Second ER: I am small and people are sociable. Men have a special place and women work. Life is exciting. To have a place I should be part of the excitement (from being thrown up in the air). I would like to have more detail of this.

Third ER: I am small and special. In order to have a place I should show people I can do things by myself. Women believe in me but I don't measure up.

The themes are excitement (train station is exciting);
baby (thrown in air and smallness is common to all three ER); and maybe to be right but this is a long shot.

C3 on subject 6:

First ER: Baby possibly from an attempt to be small and waiting for mom.

Second ER: Baby here also from being center of attention and smallest.

Third ER: Here he goofs up in the end.

The themes are baby; inadequate, from first and third ER but not very solid; and getter. I always think of baby and getter together.

T1 on subject 6:

First ER: Others are active and not there for me. The world is sensual and full of flying mud. I am potentially exposed, alone and small.

Second ER: Others are task focussed and socially oriented. Men take in, talk and consume. Women are in the work place and involved in producing and include me. The world is sensual and full of contrasts: heat and shade, threatening and protecting. I am part of a social world, an experiencer and an object of play.

Third ER: Others are there for me: givers, focussed on me. The world is full of goodies and I act independently with others in background as support.
For a theme none really fit although possibly an experiencer/dependent.

T2 on subject 6:

Difficult to categorize. Very clear description but no pattern. Maybe a baby: a lot of charm and cuteness, the focus of attention of others and gaining approval of others. He is not happy when he is not being noticed.

T3 on subject 6:

I am alone and cold waiting for mom and there is no one there. I can't get away from the cold.

I like to feel I belong and be the center of activity although I am afraid that something will happen—it always does. Life is that way.

Cl on subject 7:

First ER: Business is proving "I was right"; then control (begging and demanding). I told you so, but I was not listened to. There is a strong sense of proving I was right and also victim if I lose control.

Second ER: Intensity of learning and the need to be right. A lot of pride when attaining a satisfactory performance.

Third ER: This one is the opposite with respect to be right. A paradox of emotional state: pain with love and
warmth. Pain is inflicted by same others who are giving love. There is no correct response possible.

The themes are to be right; control; and excitement (seems to be in all of the ERs).

C2 on subject 7:

First ER: I am right. In order to have a place people should listen to me. Life is dangerous. People don't understand or listen to me.

Second ER: I am capable (the element about standing). In order to have a place I should know what to do and how to do it. She was and she was special in every way. Doing and looking perfect.

Third ER: I am helpless. Life is dangerous and I can be hurt. People are kind and loving. Life is confusing.

The themes are to be right, from first knowing what was to happen but being ignored and second she was doing everything correctly; driver, this element was in the second in achieving and satisfaction; and martyr, unfair when people don't listen and she could get hurt.

C3 on subject 7:

First ER: Need to be right or superior or control.

Second ER: Confusing, this is almost a report. The whole ER is missing. It seems to be superior, some accomplishment.
Third ER: To be right. Demanding her sister—her sister didn't listen to her. She was right. When you don't know what is going on you suffer.

The themes are to be right; to be superior; and victim (two instances of suffering.

Tl on subject 7:

First ER: Others do not listen to my needs and wants. The world is unyielding and a place of melodrama. I need to be right and will act out to prove rightness and I am entitled to run the show.

Second ER: Others are all performers with some others being exotic. The world is a place of intense drama with beauty being superficial. I act out motions and am superficial.

Third ER: Others cause pain and pretend kindness. The world is intense and incomprehensible. I am ?

The themes are getter from a sense of entitlement and martyr to prove rightness and moral superiority.

T2 on subject 7:

In life it is important to obtain goals. Life is full of suffering. You suffer for a cause in order to get what you want or do what you believe is right.

Suffering from first ER in getting what you want and in third to please other people because they are kind and
loving.

The subject is also goal directed, ambitious and a driver. The themes are therefore martyr and driver.

T3 on subject 7:

I get very angry when things don't go my way; so I do all I can to make them to. I am proud that I don't cry when something hurts.

It is important to me that people I admire, pay attention to me. I will endure anything so long as they do pay attention to me.

Cl on subject 8:

First ER: A sense of a baby or juvenile. Doing whatever I want with no social involvement.

Second ER: A sense of helplessness. The world is dangerous and unpredictable and I can only be afraid and I can't help.

Third ER: This is almost identical to the second. My older brother so I must be younger if not the youngest. I am an observer.

The themes seem to be baby; followed by inadequate and very weakly getter.

C2 on subject 8:

First ER: I am loving and affectionate. In order to
have a place I should do what others approve of or what others expect. People are critical.

From all three ERs it seems that women expect affection.

Second ER: Life is dangerous and threatening. Common to second and third ER is the idea that I am helpless and afraid and people get hurt.

In contrast to the first ER (the second and third) expect affection and loving with women while men face danger. There is harshness there but detail is lacking so I am not sure where the client fits in other than having to protect her self.

The themes are to be liked, showing affection and loving; and control, life is dangerous so I must be in control inorder to be safe. There is a threat of losing people near to you. If the second and third ER had more detail, control could be the primary life style but I stuck with the first selection due to the action in the first ER.

C3 on subject 8:

Possibly the older brother is a guiding light. He tells you what to avoid. Spontaneity gets you into trouble: he in the first ER and his brother in the second ER.

This is a difficult one and I would like to have more ERs. I would choose to be liked from the first ER.

T1 on subject 8:
First ER: Others are desirable and the world is a place of love and shame. I push myself toward others, have shameful desires and act unthinkingly from habit.

Second ER: Others are leaders who trip up or blunder. The world is a place of danger and I follow.

Third ER: Others are active, doers, and victims. The world is a place of danger and I watch.

The theme chosen is inadequate because the subject is a follower and he would fail if responsibility is given. Watching is one way of limiting activity and less situations where you can be inadequate.

T2 on subject 8:

Family contacts are important. It is important to express closeness. If a family member is hurt then you feel guilty.

I cope with stress through moral judgements of myself. There is a great need to be good.

The theme chosen is to be good. In the first ER it is difficult to accept a very simple mistake and in the second he felt bad about what happened to his brother.

T3 on subject 8:

I don't mind taking chances to get what I want as long as I don't get caught.

I easily imagine physical feelings like softness and
pain. Blood reminds me of death and I think about it a lot.

C1 on subject 9:

First ER: A need for control: her own body and her new friend. I also suffer embarrassment and discomfort.

Second ER: Nobody not even war is going to make me follow rules. Holding all three ducks at once speaks to the idea of control.

Third ER: Again control. A perceived necessity for a quick resolution. Complete control of the situation. It is a comfortable scene but still present.

The themes are control first; getter, second (a people collector or of living things—friend, ducks, and implicit gain of new sister; and weakly excitement the third theme (she is always in the middle of a predicament).

C2 on subject 9:

First ER: I am in control or should be in control or maintain control. In order to have a place I must be acceptable to other. People are friendly and helpful or women are friendly and men are understanding and helpful. Life is full of the unexpected and I handle it with difficulty.

Second ER: I am calm and fearless. In order to have a place I should avoid other's anger or disapproval. People have expectations of me. When I am technically correct
others think I am wrong.

Third ER: I am curious, content, and the world is fascinating. Women are knowledgeable. In order to have a place I should know the truth.

The theme is between control and to be liked. I choose to be liked first because in the first ER she wants to be accepted by the eleven year old and in the second she didn't want mom's displeasure. The third ER also shows a desire for strong acceptance and belonging.

C3 on subject 9:

The counsellor starts talking about the idea of control but then drops it.

Avoids feelings: In the second ER there is a total absence of any danger, no fear of danger. There is no embarrassissement in the first ER. Going for reason leads to success.

Driver: In the second ER she pursues her goal and in the third she is curious all by herself with no others.

Control is chosen for the final possible theme.

T1 on subject 9:

First ER: Others are flatterers, have distant ideals and receive my admiration or are caretakers. The world has reality time constraints: survival in comfort requires time constraint. I am in a down position, focussed on bodily needs and a messmaker.
Second ER: Others are potential threats. The world requires survival against those threats as well as attending to time limits. I am focussed on my own needs-counter to authority.

Third ER: Others are social and include me. The world requires you to act with speed. I am an experiencer.

The themes are to be liked (she will live with discomfort to receive others admiration) and excitement (from the rush and risk).

T2 on subject 9:

Life is an arena where events and people will try to control you if possible. This is to be resisted.

She deals with stress through keeping things orderly to avoid surprises.

The theme is control. First the surprise bowel movement is embarrassing—to avoid it and cover up or hide spontaneity. Second she gets the ducks even though it is forbidden. She was determined. In the third it was easier to think of childbirth as what her mother told her rather than looking closer to avoid disturbing thoughts.

T3 on subject 9:

How others see me is very important. I want to do the right thing and to be accepted because I like that.

I feel curious about things I don't understand but it is
too risky to ask questions about it. It could be embarrassing and therefore too dangerous so I would rather not ask—just imagine what people might think of me.

C1 on subject 10:

First ER: Quite interesting. The new dress might be a getter; mom made it so possibly inadequate. A people watcher: she knows what other kids are doing and have on. All her senses are focussed and actively involved—eyes, smell, colour; there is the sense of being on the outside (possibly inadequate). The need to belong (the right dress).

Second ER: Again: life rears tremendous barriers to her progress (the dog). The fear of dogs also creates a barrier. It is difficult to deal with the tasks of life—in this case, friendship.

Third ER: A sense of getting—the new bed. Mom is outside so a sense of separation. Mom is a supporter but removed.

There is a sense of separation, being low down, therefore one of manipulation and power, through water power.

The theme is primarily that of baby, followed by secondary ones of control, and inadequate.

C2 on subject 10:

First ER: "I am unsure and uncertain". In order to have a place I should meet requirements or be like others or
have what others have. Women or people are watching me. Life is challenging—new experiences.

Second ER: I am afraid and defenseless. Life is threatening and dangerous. In order to have a place I must be protected or in control.

Third ER: "I am alone". In order to have a place I should have others' attention when I want it. Women work hard. Life should give me what I want.

The theme could be either getter or control. Getter elements in all three ERs. Green dress in the first ER with specially earned acceptance. In second, she needs a protector and is entitled to protection and in the third she gets a new bed and wants mom's attention. Control is shown in the first by the fact she is secure and in control with her dress. In the second ER she is out of control and in the third she is not in control and wants to control others.

C3 on subject 10:

First ER: The need to be liked or to be a part of something.

The third ER changes the slant of the first. She is a getter here and wants to get service and attention from mom.

The getter theme is chosen because of the attention from the new green ballet dress with mom watching. The secondary themes are being liked and a part of the group and victim which is kind of thrown in without any reasons.
T1 on subject 10:

First ER: Others are givers, doers and concerned with me or are like me. The world is a sensual place of images and beautiful colors or aesthetics. I am a student or learner and need to know-an image maker.

Second ER: Others are worthy of my risk taking. The world is a terrifying place and I am alone and I run from danger and feel helpless or defenseless.

Third ER: Others ought to focus on me always. They should give to me and they are the workers. The world is a comfortable place and full of goodies. I play helpless and use tears to get others to focus on me.

The baby theme is chosen due to the helpless and dependent stance with the tendency to play crybaby.

T2 on subject 10:

Life is full of new things. There are new situations to be dealt with and it is difficult to adjust to this. I cope by seeking others reassurance and by fitting in.

This doesn't seem to fit into any category. Possibly to be liked because in the first ER she felt apprehension and the new dress like the others helped her fit in and others would approve. When she was chased by the dog there was no one there to reassure her. It was very frightening and really different. In the new bed scene she wanted attention
and wanted mom to tuck her in and to reassure her. She wants reassurance and it is scary when it is not given.

T3 on subject 10:

I feel nervous everytime I am on unfamiliar ground and terrified when threats come up so I need to run away to mom. Mom is important to me. I want her to be with me and do things for me and I feel good with her and safe.