## **BOOK REVIEW**

## The Psychological Assessment of Abused and Traumatized Children

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F. D. Kelly, *The Psychological Assessment of Abused and Traumatized Children*, Mahwah, NJ: Lawrence Erlbaum Associates, Inc., 1999, 260 pp. ISBN 0-8058-2973-3

Over the past 20 years, abused and neglected children have become a prominent focus of research in several disciplines, particularly clinical and developmental psychology. However, less attention has been directed toward the psychological assessment of this pediatric population. Kelly's The Psychological Assessment of Abused and Traumatized Children provides an empirically validated clinical paradigm for applying and interpreting free response measures of personality with maltreated youth. Although Kelly's text emphasizes the Rorschach and Thematic Apperception Test (TAT), the theoretical framework within which the clinical paradigm is embedded is applicable to other psychological assessment tools as well. Similarly, although intended for students and providers of psychological assessment services, the ideas presented in The Psychological Assessment of Abused and Traumatized Children offer numerous opportunities for application in psychology and other social science fields.

Despite a burgeoning interest in the deleterious impact of trauma on children's social, behavioral, and emotional adaptation, the way in which children interpret and make sense of their experiences—representations that in turn guide manifest behavior—has received little attention heretofore. Kelly aims to correct this imbalance by providing clinicians with tools for understanding "how the child creates a representational schema of the past that subsequently mediates, guides, and informs, ensuing interpersonal involvements and relationships" (p. 174). Just like in physical medicine in which the study of disease precedes the discovery of treatment, it is argued that exploring the intrapsychic processes of abused

children will foster the development and implementation of effective and appropriate therapeutic interventions with this population. Or, as Freud (1909/1955) once put it (in the Little Hans case), "a neurosis never says foolish things" (p. 27).

Kelly's approach to the psychological assessment of maltreated children is predicated on the assumption that children's behavior is psychologically meaningful; thus, manifest symptoms can be meaningfully interpreted within a psychological model of the whole person. A cogent summary of the theoretical framework from which this assertion derives is provided in the first few chapters of the text. Using clinical vignettes to illustrate the complexity of children's cognitive, perceptual, and representational worlds, Kelly demonstrates that understanding the intrapsychic effects of trauma requires exploration at multiple levels. As such, he argues that the inner world of trauma is best conceptualized when the taxonomic lens of the dominant diagnostic paradigm (i.e., Diagnostic and Statistical Manual of Mental Disorders, 4th ed.; American Psychiatric Association, 1994) is supplemented by a multidimensional perspective that consists of an integrated understanding of how experience affects self, ego, object, and drive. Thus, psychoanalytic understanding enriches a purely descriptive nosology.

In the second chapter of the text, Kelly provides an overview of two prominent theoretical models within which the experience of the traumatized child has been addressed. Against the backdrop of contemporary psychoanalytic theory, the salience of object relations and ego functioning for conceptualizing the intrapsychic world of the maltreated

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child is discussed first. Kelly reviews the central figures in both historical and contemporary object relations theory (e.g., Klein, Fairbairn, Bowlby, Mahler, Kohut, Kernberg), drawing attention to the central tenets that unite different schools of object relations thinking. Kelly identifies several core principles of object relations theory including emphases on the disproportionate salience of early experience for later adaptation, the role of inner working models/representations as mediators of continuity in adaptation across time, the universal need for relatedness, and the deficits that result when it is thwarted. In addition, elements of historical and contemporary trauma theory (e.g., Herman, Terr) are integrated into a discussion of object relations among traumatized youth. Object relations involve a view of the self, a view of the other, and the affective valence between them. A comparatively brief review of developmental psychopathology follows with emphasis accorded to affect regulation, attachment, the development of the self, and peer and school functioning. Although Kelly's theoretical affiliation with contemporary psychoanalysis is apparent in the reading of this text, he demonstrates a willingness to engage with other ideas and incorporates them into the discussion where relevant. Ultimately, the reader is left with a good enough foundation of theoretical explication and clinical illustration to guide her or him although the dense empirical material presented in the second section of the text.

The second part of the text introduces a clinical paradigm for the assessment of abused and traumatized children using the Rorschach and TAT. In the third and fourth chapters, Kelly presents the seminal empirical efforts of Blatt, Mayman, and others to develop and psychometrically evaluate measures of object representations. These efforts have culminated in two reliable and valid measures of object relations, each of which is presented at a level of detail that is sufficient to train a person familiar with the Rorschach and TAT in coding.

The Mutuality of Autonomy Scale (MOA) is based on the assumption that internal working models of the self and others are revealed through animate and inanimate movement in Rorschach responses (i.e., F, FM, m), a view, by the way, closest to Piotrowski. Movement responses are rated along a 7-point ordinal continuum ranging from responses that reflect positive, empathic, autonomous representations of relatedness (Point 1) to those that connote representations characterized by malevolence, enmeshment, and fear of incorporation (Point 7). The MOA scale yields information about two dimensions of representation, the degree of self-object differentiation and the degree of empathic relatedness. Additional nomothetic Rorschach measures using Exner's Comprehensive System are also introduced, including indexes of boundary disturbance (i.e., Lambda, inanimate movement, deviant verbalizations/special scores), thought disorder (i.e., incongruous or fabulized combinations, contaminations, confabulations), and defensive failures (i.e., de-repressed contents index, when the lid is off the

id). The influence of abuse and trauma on children's MOA scores and Rorschach profiles is briefly reviewed despite the dearth of empirical literature addressing this question.

The TAT Social Cognition and Object Relations Scale (SCORS) measures four dimensions of object relations, each of which is rated on a five-level scale with lower levels reflecting more primitive representations. The first dimension (scale) captures the Complexity of Representations of People (CR), with higher level scores reflecting greater differentiation, complexity, and articulation of person representations. The second dimension taps the Affect-Tone of Relationship Paradigms (AT), which reflects the individual's interpersonal expectations. Level 1 scores suggest that the individual expects relationships to be harmful, threatening, or destructive, whereas Level 5 scores suggest secure expectations of safe, nurturant, and rewarding interpersonal exchanges. The third scale assesses the Capacity for Emotional Investment in Relationships and Moral Standards (CEI). This measure evaluates the extent to which relatedness representations emphasize need gratification and self-preservation/advancement (Level 1) as opposed to reciprocity and mutuality (Level 5). Finally, the Understanding of Social Causality (USC) scale assesses the individual's ability to form logical and accurate causal attributions in social situations. Level 1 responses indicate an impaired ability to make accurate social inferences, whereas Level 5 responses connote complexity in social attributions such that the individual is able to understand self and others' behavior as related to psychological factors (i.e., motivations, intentions, desires).

A review of the extant literature on abused and neglected children demonstrates that SCORS offers a multidimensional, read "enriched," perspective, which reveals how different aspects of a child's representations may be differentially affected by trauma. Specifically, in comparison to nonabused youth, maltreated children tend to have lower mean scores and more Level 1 responses on the scales tapping affective (i.e., AT, CEI) rather than cognitive (i.e., USC, CR) aspects of object relations. The object representations of maltreated children tend to be more primitive and are often tinged with negative, destructive, and/or malevolent features. In sum, Kelly provides empirical data showing that Rorschach and TAT object representation measures provide a valid and reliable indication of the maltreated child's notions of self and others, which in turn can be used to inform the clinician's selection, application, and evaluation of treatment options.

Throughout the book, Kelly artfully weaves theoretical supposition with clinical exposition to ground the empirical and methodological material in clinical application (norms without theory are just numbers; theory without norms is just fantasy!). The final section of the book consists of extensive case presentations—seven maltreated children and two adults with histories of childhood abuse—that illustrate the application of the MOA and SCORS measures with this population. Although the text emphasizes ideographic ap-

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proaches to interpretation, each case presentation is discussed with respect to nomothetic, ideographic, and phenomenological interpretations of the clinical material.

As noted by Kelly, assessing the effect of abusive experience on children's mental representations is important because the internal working models that derive from early exchanges with caregivers shape and guide later patterns of interpersonal relatedness including the care-giving behaviors individuals subsequently administer to their own children. Parenthood is the axis of the life cycle; in the beginning, we are parented, we practice parenting, we then parent, and at the end of life, get parented. The final two case presentations of mothers with histories of childhood abuse demonstrate the salience of object-relations assessment for intervening with maltreated children as well as with high-risk or abusive parents. Kelly provides compelling support for the importance of reliable and valid free response measures of representation and ego functioning for guiding therapeutic interventions with maltreating families at multiple levels.

The clinical examples illustrate several of the core arguments in Kelly's text. First, psychological material often transcends other forms of clinical information (e.g., interviews, observations) in providing a comprehensive picture of object relations and ego functioning among maltreated youth. Second, although these measures are equally valid for other populations, they are particularly useful for young and/or maltreated children who often provide limited response elaboration on the Rorschach and TAT. For example, despite a sparse Rorschach protocol (i.e., less than 14 responses), it is claimed that clinically meaningful and psychometrically sound interpretations can be made using the MOA. Third, abuse is itself a unique experience, the effects of which are best understood by incorporating an ideographic approach with more traditional nomothetic approaches to interpretation, diagnosis, and treatment. Finally, the information obtained from implicit measures of children's object relations and ego functioning is a valuable tool for providers as they plan, execute, and evaluate therapeutic interventions. Just as internalized representations of primary relationships will guide the child's future adaptational efforts, so too will these representations influence the child's engagement and behavior in the therapeutic context. Implicit measures of object relations may "alert therapists and others (e.g., teachers and foster parents) about what types of situations and encounters will precipitate negative or positive reactions" (p. 181).

The Psychological Assessment of Abused and Traumatized Children constitutes a meaningful contribution to the development and implementation of effective assessment tools for working with abused and traumatized children. Al-

though this text will be helpful for those who apply and/or interpret the Rorschach and TAT with maltreated youth, its strong emphasis on empirical and methodological specifications may prevent less experienced clinicians or readers from other disciplines from becoming engaged with the material. Moreover, with respect to the details of implementing the MOA and SCORS object relations measures, Kelly could have provided a bit more information about when these measures should be utilized, under what conditions, and by whom. Questions left unanswered include the following. How old should the child be for these measures to be psychometrically interpretable? If applicable for any age, how long/elaborate does the protocol need to be to warrant the use of these techniques? Who is qualified to administer and interpret these measures (e.g., licensed psychologists, social workers, etc.).

Nevertheless, the text fills a notable void in the extant literature on maltreated youth. Ultimately, it is definitely worth the effort to wade through the occasionally dense material to grasp the message. The Psychological Assessment of Abused and Traumatized Children constitutes a valuable first step toward addressing the unique needs of maltreated children with respect to psychological assessment and interpretation. Kelly's call for attention to intrapsychic processes as well as manifest outcomes is refreshingly insightful. Too often researchers have utilized self-report or observer rated "outcome" measures for the sake of convenience and availability to the exclusion of more complex measures of intrapsychic phenomena. This research trend has led many to overlook a substantial portion of maltreated children who fare well on manifest indexes of competence but who demonstrate clinically significant maladaptation with respect to internal features of adjustment. Recent findings in the resilience literature have shown that some children who fare well on overt measures of adaptation (e.g., classroom decorum) show more impairment on indexes of depression and anxiety than their "nonresilient" peers, an eleoquent demonstration of the importance in understanding the nature of intrapsychic phenomena. It is now in the hands of researchers and clinicians alike to take the initiative to explore the representational effects of trauma to better understand the maltreated child from within.

## **REFERENCES**

American Psychiatric Association. (1994). *Diagnostic and statistical man*ual of mental disorders (4th ed.). Washington, DC: Author.

Freud, S. (1955). Analysis of a phobia in a five year old boy. In J. Strachey (Trans.), The standard edition of the complete psychological works of Sigmund Freud (Vol. 10, pp. 1–147). London: Hogarth. (Original work published 1909)