While the efficacy of early recollections (ERs) for diagnosis into categories of current psychopathology of the subjects has been examined before (2,3), the present study investigates the extent to which Adlerian clinicians can tell from the ERs of children and adolescents whether they have been diagnosed by a clinical team as cases of psychoneurosis or as cases of adjustment reaction, conduct disturbance.

**Method**

**Subjects.** The Ss were 51 elementary and high school pupils referred to a community child guidance clinic, who had been diagnosed as psychoneurotic or as adjustment reaction by the clinic's staff and who were able to give more than one ER. There were 35 boys and 16 girls between 5 and 16 years old.

**Procedure.** During a two-year period, the writer requested all Ss being tested to report ERs: "I want you to think back to when you were a very small child. Please tell me your very first memory." If Ss hesitated or did not report a specific incident, E added: "I would like you to tell me an event or happening that you actually remember." ERs were recorded with the age at which they occurred until Ss started to relate current events.

**Scoring.** Three Adlerian clinicians with a minimum of five years' experience in the use of ERs were asked to make a diagnosis of psychoneurosis or adjustment reaction on the basis of the ERs. The age and sex of each child and definitions of the two diagnostic categories (1) were also given to the judges. Furthermore, they were given the formulation of one judge: "I have made the distinction on the basis of whether the ERs show active rebellious tendencies or passive ones." The judges worked independently.

**Results**

Judge A correctly diagnosed 42 of the 51 Ss, Judge B 34 Ss, and Judge C 26 Ss. When the data were subjected to X² analysis, the results of Judge A were found to be significant at the .001 level, those of Judge B at the .02 level, while those of Judge C did not achieve statistical significance. However, when the three judges' ratings were combined, the results were significant at the .001 level.

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Coefficients of correlation between the diagnoses of the three judges and those of the clinic were .70, .32 and .08, the first two correlations being significant at the .01 and the .05 levels, respectively. The highest correlation between the judges was only .11.

The results indicate that experienced clinicians, on the basis of ERs alone, can make accurate diagnostic judgments only to a limited extent. However, these findings lend support to the use of ERs in a battery of projective tests or as an aid in formulating individual life style.

References