

Psychoanalytic Psychology

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Online First Publication, May 11, 2023. <https://dx.doi.org/10.1037/pap0000460>

CITATION

Felici, C., Madeddu, F., Doering, S., Clarkin, J. F., & Preti, E. (2023, May 11). Knowing Me, Knowing You: A Systematic Review of Object Relations Assessment. *Psychoanalytic Psychology*. Advance online publication. <https://dx.doi.org/10.1037/pap0000460>

Knowing Me, Knowing You: A Systematic Review of Object Relations Assessment

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Tools for assessing object relations (ORs) are fundamental for psychodynamic theory, research, and practice. ORs play an important role in diagnostic and therapeutic processes, helping therapists to better understand and manage complex relational functioning in their patients. The clinical relevance of OR is also recognized by the first criterion of the *Diagnostic and Statistical Manual of Mental Disorders, fifth edition Alternative Model for Personality Disorders*. Our goal is to provide clinicians and researchers with an updated review of the available empirical tools to assess OR. We conducted a systematic search on APA PsycInfo and Pubmed and retrieved 42 instruments from the existing literature. Some of these assessment tools are well established in the scientific community. Among the less popular ones, we identified some instruments that show good potential and may be granted a further round of validation. We encourage the development of existing and new instruments within the framework of Kernberg's theory of personality organization, and a further inquiry into qualitative aspects of ORs dyads, which may help therapists obtain more sophisticated information on their patients' relational functioning.

Keywords: object relations, assessment, personality disorders

Supplemental materials: <https://doi.org/10.1037/pap0000460.supp>

Theoretical Perspective



The theory of object relations (ORs) is widely recognized as one of the pillars of psychodynamic theory and practice. Across different theoretical perspectives, ORs are defined as cognitive-affective symbolic representations of our interpersonal experience (Mullin et al., 2017), which are internalized since early childhood and constitute the basis of the evolving psychic structure, organizing, and directing subsequent behavior. Authors of different approaches disagree about various features of OR, such as their degree of fluidity/rigidity, the conditions under which they can change, and the extent to which they are accessible to consciousness (Huprich & Greenberg, 2003); nevertheless, the theoretical and clinical utility of ORs is acknowledged on multiple fronts. Internal working models (Bowlby, 1982) and Important People or their Internalized Representation (Benjamin, 1974) in the context of attachment theory, relational cognitive schemas (Beck & Alford, 1971) in cognitive behavioral therapy and cognitive-affective units (Mischel & Shoda, 1995) in the area of social

cognition are some examples of conceptualizations that are comparable to ORs, since they recognize the existence of latent internal schemas representing the individual's relational world.

The theory of ORs proves particularly useful in conceptualizing personality disorders. There is general agreement that maladaptive mental representations of self and others contribute to the behavioral and affective dysregulation that characterizes personality disorders (Huprich et al., 2017). The relevance of ORs for the diagnosis of personality disorders has also been recognized by the *Diagnostic and Statistical Manual of Mental Disorders, fifth edition* task force (Clarkin et al., 2020): In fact, Criterion A of the Alternative Model for Personality Disorders (AMPD; American Psychiatric Association, 2013) focuses on the evaluation of self and interpersonal functioning, incorporating key contributions of the ORs model. One of the most relevant contributions to a contemporary conceptualization of ORs, focusing on understanding and treating personality disorders, is Kernberg's theory of personality organization (Kernberg & Caligor, 2005). In this framework, ORs are defined as dyads, formed by a representation of the self and a representation of the other linked together with an affect. Transference-focused psychotherapy (TFP; Yeomans et al., 2015), one of the evidence-based treatments for borderline personality disorder, was developed in this theoretical framework.

Clinical Relevance

ORs have a fundamental role in the diagnostic process, treatment planning and conducting, and treatment outcome monitoring. According to Huprich and Greenberg's review (2003), the assessment of OR has become a fundamental tool in the field of clinical research; there is an established association between the level of development

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The authors have no conflicts of interest to disclose.

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of OR, adult psychopathology, and treatment outcome. Patients with a more mature ORs functioning tend to remain in therapy (Ackerman et al., 2000), to rate the working alliance as more robust (Sanders et al., 2014) and to prompt a more psychodynamic than cognitive behavioral therapy process (Sanders et al., 2014; Vaughn et al., 2021). Conversely, psychodynamic treatment seems to have a positive impact on the development and integration of ORs. In a study by Mullin et al. (2017), patients with mild to moderate psychopathology treated with psychodynamic techniques showed an improvement in global ORs functioning, even when controlling for number of therapy sessions. Assessing the level of patients' ORs before the beginning of therapy could help the clinician choose an appropriate relational style (Piper et al., 2004).

Clinical research in this area suggests that assessing OR gives the clinician fundamental information regarding the individual's degree of relational impairment and her ability to establish and maintain a good therapeutic relationship; on such basis, the therapist could make an informed decision on the adequate treatment modality for each patient (psychodynamic, relationship-focused, transference-focused). This article will provide clinicians with a review of different methods to assess ORs, covering various theoretical orientations and administration methods. Applying such methods could allow clinicians to conduct more systematic and informed evaluations of their patients' relational functioning and tailor the treatment to their needs.

Instruments for OR Assessment

Given the relevance of ORs for psychodynamic theory and practice, many empirical instruments to assess this construct have been developed over the years. The most recent review of empirical instruments to assess ORs is Huprich and Greenberg's (2003) "Advances in the assessment of ORs in the 1990s." The authors examined all empirical studies performed during the 1990s with the terms "object relations" or "object representation" in their title or abstract, restricting the focus to adult studies. They extracted 12 different measures from their findings.

Our research goal was to conduct a thorough literature review of empirical methods to evaluate ORs, regardless of the theoretical framework behind the instruments, their way of administration and scoring, or their popularity. Although we are aware that some psychodynamic constructs may present significant clinical and theoretical overlap with ORs, we did not consider tools for the assessment of these related constructs, such as defense mechanisms (e.g., Cramer, 2015) and attachment (Thompson et al., 2021), to keep our focus on OR. The present synthesis will provide clinicians with an updated list of assessment options. Our review will also benefit researchers interested in ORs theory, who will be able to investigate different constructs and phenomena related to OR with increased measurement strength and precision.

Method

In December 2021, we conducted a literature search on two databases, APA PsycInfo and Pubmed. On APA PsycInfo, we used the Advanced Search option and entered as a query "object relations (in Identifier/Keyword) AND instrument OR assessment OR measure (in All fields)." No other limitation to the search, such as the publication date range, was specified. When considering the eligible results for the review, we included articles published in scholarly journals that mentioned using any assessment tool to

evaluate ORs. We decided to exclude dissertations and theses to keep the number of retrieved documents more manageable. On Pubmed, we used the Advanced Search option and entered as a query "object relations (in Title/Abstract) AND instrument OR assessment OR measure (in All fields)," since there was no Identifier/Keyword specifier. No other limitation to the search was specified. The first author conducted the review process. The first screening step was to exclude nonrelevant articles based on title and abstract reading; then, full-text reading confirmed the inclusion of the selected articles. The studies were considered fit for inclusion when they employed an assessment tool for ORs or when they reviewed such tools.

Results

The APA PsycInfo search yielded 346 results. The Pubmed search yielded 371 results, for a total of 717 records retrieved. After duplicate removal, 564 records were scrutinized. Based on the title and abstract reading, 229 articles were excluded. Of the remaining 335 reports, 29 were only available for a partial text reading. Thus, the remaining 306 reports were reviewed, and 9 were excluded because they included empirical tools for assessing different constructs (i.e., defense mechanisms). The process mentioned above is described in Figure 1. The empirical tools to evaluate ORs that emerged from the scrutiny of the final 297 articles¹ are 38. Revised, shortened, or extended versions of existing instruments are reported together with the latter.

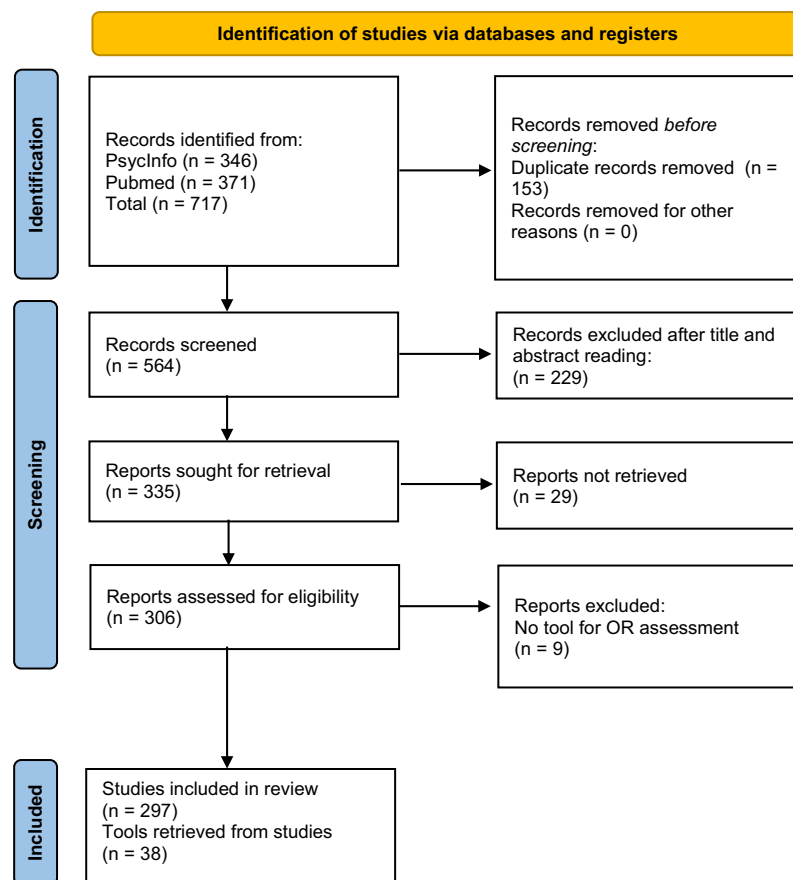
Tables 1–3 report all the retrieved instruments. In Table 1, we report self-report instruments that assess ORs. In Table 2, we report clinical interviews and scales based on projectives. In Table 3, we report instruments that evaluate ORs through the analysis of narratives and transcripts (i.e., clinician-rating instruments). We decided to consider as separate tools the scales or methods applied to the same coding material; for example, different scales that assess ORs on Rorschach protocols or Thematic Apperception Test narratives are reported separately. For each instrument, the table reports the method of administration, the target population (if specified), the number of retrieved articles in APA PsycInfo and Pubmed, and the date of the most recent publication retrieved from our search to mention such instrument. Also, in the "OR focus" column, we specify if the instrument has a specific focus on OR assessment—that is, if the instrument was developed to assess ORs directly or if it assesses closely related constructs. In the paragraphs following the tables, we briefly discuss some of the instruments we have retrieved, which we consider particularly useful and interesting for our review; we report the scales of the tools, the available psychometric properties, and some examples of studies in which they were employed for the assessment of OR.

Self-Report Tools

According to our review, the Bell Object Relations and Reality Testing Inventory (BORRTI; Bell, 1995) is the most popular self-report measure to assess ORs. It was designed to help identify individuals with disturbed ego functioning, including those with personality disorders or clinically relevant reality testing deficits. The ORs scale comprises 45 items, which load on four factors:

¹ A complete list of the included studies is available in Supplemental Table S1.

Figure 1
Flowchart of Review Process



Note. ORs = object relations. From “The PRISMA 2020 Statement: An Updated Guideline for Reporting Systematic Reviews,” by M. J. Page, J. E. McKenzie, P. M. Bossuyt, I. Boutron, T. C. Hoffmann, C. D. Mulrow, L. Shamseer, J. Metzloff, E. A. Akl, S. E. Brennan, R. Chou, J. Glanville, J. M. Grimshaw, A. Hróbjartsson, M. M. Lalu, T. Li, E. W. Loder, E. Mayo-Wilson, S. McDonald, L. A. McGuinness, L. A. Stewart, J. Thomas, A. C. Tricco, V. A. Welch, P. Whiting, and D. Moher, 2021, *BMJ*, 372(72) (<https://doi.org/10.1136/bmj.n71>). CC BY 4.0. See the online article for the color version of this figure.

Alienation, Insecure Attachment, Egocentricity, and Social Incompetence. The BORRTI’s manual (Bell, 1995) provides documentation of the scales’ reliability and validity: Cronbach’s α ranges from .78 to .90; test–retest reliability is adequate at 4- and 13-week intervals (.58–.90). The BORRTI also has good convergent and discriminant validity (Pad et al., 2020). Consistently with its primary aim, the BORRTI has been used for many studies investigating schizophrenia, psychotic disorders, and personality disorders (e.g., Bell et al., 2001, 2007; Hansen et al., 2009). In summary, the BORRTI is easy to administer, has adequate validity and reliability coefficients, and has a strong base in ORs theory. The primary limitations Holaday and Glidewell (2000) identified are the expensive scoring procedures, some idiomatic expressions used in the items that may result confusing also for native English speakers, and the intrinsic limits shared by self-report tools.

The Inventory of Personality Organization (IPO; Lenzenweger et al., 2001) is a self-report questionnaire for assessing personality organization pertaining to Kernberg’s ORs model of personality

disorders. It comprises 57 items, and the more recent factor solution (Ellison & Levy, 2012) presents four factors: Instability of self/others, Instability of goals, Instability of behaviors, and Psychosis. Different studies report good internal consistency and test–retest reliability (e.g., Lenzenweger et al., 2001; Normandin et al., 2002) and convergent validity (Berghuis et al., 2009; Lenzenweger et al., 2001). The Italian validation study (Preti, Prunas, et al., 2015) reports Cronbach’s α values that range between .72 and .91 (mean α = .81) in the Community sample and between .80 and .93 (mean α = .85) in the Clinical sample. Test–retest reliability after 1 month ranged from r = .68 to r = .92. The IPO assesses ORs through one of its scales, but it is not a specific measure. It is generally used to evaluate personality organization in general (e.g., Beheydt et al., 2020).

The Mother’s Object Relations Scales–Short Form (MORS-SF; Oates et al., 2018) is a 14-item self-report questionnaire that assesses mothers’ representations of their infants on two axes: the emotional warmth–coldness and the invasion–withdrawal of the infant toward the mother. In the validation study (Oates et al., 2018), conducted on

Table 1
Self-Reports Assessing OR

Abbreviation	Full name	Authors	Publication year	Type	Specific target	OR focus	No. of articles	Latest article
BORRTI	Bell's Object Relations and Reality Testing Inventory	Bell	1995	Self-report		Yes	51	2020
IPO	Inventory of Personality Organization	Lenzenweger et al.	2001	Self-report		Yes	4	2015
MORS(-SF)	Mother Object Representation Scale	Oates et al.	2018	Self-report		Yes	4	2013
TOR(-SF)	Test of Object Relations (short form)	Barberis et al.	2020	Self-report		Yes	3	2020
PBI	Parental Bonding Instrument	Parker et al.	1979	Self-report	Parents	No	2	2010
AORI	Attachment and Object Relation Inventory	Buelow et al.	1996	Self-report		Yes	1	1996
DSS	Dyadic Splitting Scale	Siegel and Spellman	2002	Self-report	Couples	No	1	2002
ACS-30	Autonomy Scale/Autonomy-Connectedness Scale	Bekker	1993	Self-report		No	1	2006
SDMI	Sexual Decision-Making Inventory	Randolph and Winstead	1988	Self-report		No	1	1988
SIH	Separation-Individuation Inventory	Christenson and Wilson	1985	Self-report		No	1	2003

Note. ORs = object relations.

a British and a Hungarian sample, Cronbach α s were .75 for Warmth and .81 for Invasion in the British sample and .79 and .71 respectively in the Hungarian sample (Simkiss et al., 2013). Age-to-age stability from age 6–12 months was $r = .63, p < .001$, for invasion and $r = .61, p < .001$ for warmth. The MORS-SF is easy to administer and score; it could thus serve as a screening tool to identify difficulties in mother–infant relationships in the first 12 months postpartum and as a research tool to explore the complex relationship between child temperament, external stressors, anxiety, depression, and the mother's representation of her child.

As shown in Table 1, most of the instruments we retrieved are reported in a limited number of studies and/or have not been mentioned in the recent literature. Some of these instruments show interesting theoretical and empirical premises and could be suitable for further validation. For example, the Attachment and Object Relations Inventory (AORI; Buelow et al., 1996) rests on the assumption that attachment style and ORs are inseparable for practical purposes since the development of secure base results from adequate object introjection and integration during early childhood (Buelow et al., 1996). It is a dimensional measure comprising 75 items, which load on six factors (Peers, Parents, Independent, Partners, Close, Secure); it presents high test–retest reliability (.92 over a 6-week interval) and internal consistency (Cronbach's $\alpha = .93$). Being a dimensional measure, the AORI can be effectively used to capture the richness and variety of attachment behaviors and ORs. At the same time, its self-report nature guarantees ease in administration and scoring procedures.

Projectives and Interviews

The Mutuality of Autonomy scale (MOA; Urist, 1977), one of the most widespread instruments for OR, is used to assess Rorschach (Rorschach Inkblot Method) protocols. It can also be applied to the Thematic Apperception Test (Murray, 1943) and the Holtzman Inkblot Technique (Holtzman, 1968). It requires less conscious reflection than a self-report and does not rely on introspection; therefore, it allows a deeper, less consciously mediated evaluation of OR. The coding system identifies the degree of autonomy and healthy communion present in applicable Rorschach responses, quantifying the extent to which implicit relational representations are healthy or mutually enhancing on a scale from 1 to 7. Interrater agreement of the MOA ranges from 52% to 91% (Holaday & Sparks, 2001). A meta-analysis supports the MOA construct validity (Graceffo et al., 2014), with an aggregated validity coefficient of $r = .24$. In a study by Ackerman et al. (2000), the MOA score was predictive of the number of psychotherapy sessions attended by patients with personality disorders. In combination with other measures, the MOA was used to individuate young male patients with eating disorders (Rothschild-Yakar et al., 2016) and to investigate the existing relationship between patient pretreatment OR and patient-rated therapeutic alliance (Sanders et al., 2014). The MOA is quick and easy to score on average length protocols; it has good psychometric properties and allows an evaluation of OR even in patients with limited access to their interpersonal world. As part of a multimethod assessment, it can contribute to understanding individuals' level of personality organization (Graceffo et al., 2014).

The Structured Interview of Personality Organization and its revised version (STIPO-R; Clarkin et al., 2016) are semistructured interviews that provide a dimensional assessment of the domains of functioning central to Kernberg's theory of personality organization.

Table 2
Projectives and Interviews Assessing OR

Abbreviation	Full name	Authors	Publication year	Type	Specific target	OR focus	No. of articles	Latest article
MOA	Mutuality of Autonomy scale	Urist	1977	Projective		Yes	36	2016
ORT	Object Relations Test/Technique	Phillipson	1955	Projective		Yes	19	2021
CO	Concept of the Object scale	Blatt et al.	1976	Projective		Yes	12	2009
STIPO/STIPO-R	Structured Interview for Personality Organization	Stern et al.	2010	Interview		Yes	6	2021
CORP	Comprehensive Object Relations Profile	Burke et al.	1986	Projective		Yes	5	1986
KORS	Krohn-Mayman Object Representation Scale	Krohn and Mayman	1974	Projective		Yes	4	1995
PORT	Percept-genetic Object Relations Test	Nilsson	1995	Projective		Yes	3	1999
KSORD	Kwawer's System for Object Relations Disturbance	Kwawer	1980	Projective		Yes	2	1990
PSM	Personal Sphere Model	Schmiedek	1974	Projective		Yes	2	1984
RGT	Repertory Grid Technique	Ryle and Lunghi	1970	Interview		No	1	2001
DAIS	Development of Autonomy and Individuality Scale	Kay and Greenway	1994	Projective	Children	Yes	1	1994
DORORS	Dietrich Object Relations and Object Representations Scale	Porcellini and Dietrich	1994	Projective		Yes	1	1994
MRO	Modello delle Relazioni d'Oggetto	Grasso et al.	2004	Projective	Adolescents	Yes	1	2004
RE-ORS	Rorschach Empathy-Object Relationship Scale	Pruitt and Silk	1964	Projective		Yes	1	1990

Note. ORs = object relations.

The “ORs” section includes questions that evaluate interpersonal relations in general, intimate relationships and sexuality, and the internal working model of relationships. The STIPO has sound psychometric properties: Cronbach’s α for STIPO dimensions ranges from .69 to .93; interrater variability varies between an intraclass correlation of .89 and 1.0; concurrent and differential validities are satisfying (Doering et al., 2013). The STIPO has been used in studies assessing personality organization in general (e.g., Di Pierro et al., 2014; Preti et al., 2018; Preti, Rottoli, et al., 2015; Tmej et al., 2021); it does not provide a specific focus on ORs, but a diagnostic overview in the framework of the ORs model of personality disorders.

Clinician Ratings

According to our review, the Social Cognition and Object Relations Scale (SCORS; Westen, 1995) and its extension, the Social Cognition and Object Relations Scale-Global rating method (SCORS-G; Hilsenroth et al., 2004), are the most used tools for the assessment of ORs. The SCORS is a clinician-rating procedure mainly used in conjunction with the Thematic Apperception Test but suitable for all types of relational narratives, including psychotherapy sessions. The SCORS originally consisted of four variables that assess the affective and cognitive aspects of an individual’s ORs (Westen, 1995). The SCORS-G breaks the original scales into eight more detailed variables: Complexity of representations; Affective quality of representations; Emotional investment in relationships; Emotional investment in values and moral standards; Understanding of social causality; Experience and management of aggressive impulses; Self-esteem; and Identity and coherence of the self. Such scales still load on a cognitive and an affective factor (Stein & Slavin-Mulford, 2017). The SCORS interrater reliability is $>.70$, while Cronbach’s α is $>.70$ for each scale except Affect tone (Hibbard et al., 2001). In a study on the SCORS-G (Stein et al., 2012), the mean interrater reliability for SCORS variables was estimated at intraclass correlation coefficient (ICC) = .73, indicating good to excellent reliability. Alpha coefficients were all above .80, with a medium α of .85, confirming solid internal consistency. Test-retest reliability for the SCORS-G variables ranges from small ($r = .30$) to medium ($r = .52$; Ridenour et al., 2022). The SCORS-G has been used to assess changes in ORs over the course of psychotherapy (e.g., Mullin et al., 2017), to assess the Level of Personality Functioning in the context of Criterion A of the AMPD (Garcia et al., 2021), to investigate the role of quality of ORs in the severity of personality dysfunction (Joyce et al., 2022), and in many other studies to investigate ORs in depth and complexity. We point out that a study exploring the convergence of the SCORS-G across early memories and psychotherapy narratives (Slavin-Mulford et al., 2020) found that only three out of eight dimensions significantly correlated with themselves across narrative types; therefore, it looks like different narrative sources tend to activate different aspects of ORs. This issue should be considered when selecting the coding material for the SCORS and investigated more deeply.

The Quality of Object Relations Scale (QORS; Azim et al., 1991) is the second most popular clinician-rating tool for assessing ORs. The authors define the quality of ORs as a person’s internal enduring tendency to establish certain types of relationships that range along an overall dimension from primitive to mature (Azim et al., 1991). Criteria are arranged within each of five levels

Table 3
Clinician Ratings Assessing OR

Abbreviation	Full name	Authors	Publication year	Specific target	OR focus	No. of articles	Latest article
SCORS(-G)	Social Cognition and Object Relations Scale	Westen; Hilsenroth et al.	1995; 2004		Yes	100	2021
QORS	Quality of Object Relations Scale	Azim et al.	1991		Yes	33	2021
ORI	Object Relations Inventory	Blatt et al.	1991		Yes	27	2021
OR_EFA	Object Relations subscale of Ego Functioning Assessment	Bellak et al.	1973		Yes	7	1992
DP	Developmental Profile	Abraham et al.	2001		Yes	3	2008
McORS	McGill Object Relations Scale	Dymetrszyn et al.	1997		Yes	3	2006
PODF	Personality Organization Diagnostic Form	Hébert et al.	2003		Yes	3	2019
SASB	Structured Analysis of Social Behavior	Benjamin	1974		No	2	2020
ORRS	Object Relations Rating Scale	Diguer et al.	2012		Yes	2	2012
PORS	Problematic Object Representation Scales	Ribeiro et al.	2010	Personality disorders	Yes	2	2010
RORS	Ryan Object Relations Scale	Ryan and Bell	1984		Yes	2	1985
AT-MCS	Affiliative Trust-Mistrust Coding System	McKay	1991	Adults	Yes	1	1991
MTCOR/IWM	Mother-To-Child Object Representation/IWM q-sort	Goodman	2005	Mothers	Yes	1	2005
CEMSS	Comprehensive Early Memories Scoring System	Last and Bruhn	1983		Yes	1	1990

Note. ORs = object relations; IWM = Internal Working Model.

(Primitive, Searching, Controlling, Triangular, Mature) and organized in four headings: Behavioral manifestations, Affect regulation, Self-esteem regulation, and Antecedent factors. The QOR is usually assessed during two 1-hr interviews conducted 1 week apart. Interrater reliability (Piper & Duncan, 1999) is moderate, with ICC ranging from .50 to .72. Lindfors et al. (2013) report good reliability and validity as evaluated in psychotherapy trials, but point out that the studies have been carried out by only one research team in Canada, limiting the generalizability of the results. The QORS has recently been used to investigate individual differences contributing to personality disorder severity (Joyce et al., 2022) and as a possible predictor of outcomes in short- and long-term psychotherapy (Lindfors et al., 2013). The QORS has also been used in the study of the effect of transference interpretation in dynamic psychotherapy (Høglend et al., 2011) and to investigate the utilization of psychotherapy in patients with personality disorders (Löffler-Stastka et al., 2005). The main limitations of the QORS are the relatively few investigations on its psychometric properties and the time-consuming nature of the administration.

The Object Relations Inventory (ORI) is an unstructured method for assessing an individual's representation of self and significant figures (Huprich et al., 2016). The ORI is derived from the Parental Description (PD) task, where individuals were asked to write open-ended, one-page descriptions of their parents (Blatt et al., 1979). To rate these descriptions, Blatt and colleagues (Blatt et al., 1988) created a set of scales, the Assessment of Qualitative and Structural Aspects of Object Representations (AOR), based on cognitive developmental theory and developmental ORs theories. The AOR includes the Conceptual Level (CL) scale, consisting of a developmental progression of object representation across five levels (sensorimotor, perceptual, external iconic, internal iconic, and conceptual). Then, there are three qualitative or thematic factors: Benevolence, Punitiveness, and Striving (ambitious, intellectual). The PD task was then expanded to include the description of a significant other, the therapist, the self, and a pet, ultimately constituting the ORI. Since the AOR failed to capture specific intersubjective dimensions of object representations, such as the differentiation of the self-representation and the articulation and stability of interpersonal schemas, Diamond, Blatt, and colleagues (Diamond et al., 1991) built the Differentiation-Relatedness (D-R) scale. The Assessment of Self-Descriptions (ASD; Bers et al., 1993) is a separate manual for rating descriptions of self, built to overcome difficulties in scoring the previous scales. The ASD involves 18 dimensions, one of which is Conceptual Level, organized into five factors: Agency, Reflectivity, Differentiation, Relatedness, and Relatedness to the examiner. Huprich and colleagues (Huprich et al., 2016) tried to summarize the research findings related to these assessment methods. The evidence for the clinical utility of the ORI is strong; still, the authors recognize a lack of studies inquiring about the ORI's psychometric properties, partly due to the composite nature of this instrument. Test-retest reliability ranges between .58 and .87 for the AOR and CL, but no study has considered the D-R, CL, or ASD. Only a few studies have tested the ORI's convergent, discriminant, and construct validity. While many studies confirm the clinical utility of the ORI, for example, to investigate the emergence of object constancy in patients with borderline personality organization after treatment (Vermote et al., 2011), other validation studies should be conducted to obtain more clarity on the ORI psychometric properties;

also, Huprich calls out for the definition of the ORI's normative data on clinical and nonclinical populations.

The Personality Organization Diagnostic Form (PODF; Diguier et al., 1996) is a system of evaluation of personality organization based on Kernberg's model. The OR dimension includes one ordinal item ranging from 1 to 5, with subtypes for each OR: Symbiotic OR with fear of annihilation, Low-level borderline OR with fear of object, Low-level borderline OR with exploitation and control of the object, High-level borderline OR with fear of abandonment and aloneness, Triadic OR with fear of retaliation. Internal consistency of the PODF is good, with Cronbach α ranging from .70 to .74 (Hébert et al., 2003). The average interrater reliability was good, with ICC = .63 (Gamache et al., 2009). The ICC between PODF scores and therapists' diagnosis ranged from moderate (.56 for Reality testing) to excellent (.82 for ORs), indicating good concurrent validity. Like other measures of personality organization, such as the STIPO and IPO, the PODF has not been used to assess ORs specifically. Still, it provides an OR dimension in a global personality evaluation context.

Among the less used instruments, the Object Relations Rating Scale (ORRS; Diguier et al., 2004) is an interesting tool conceived to evaluate an individual's ORs dyads, in line with Kernberg's conceptualization. The aim is to analyze a subject's interaction behavior by identifying intense emotional or transference activity in the session/interview. The first three scales pertain to the patient's contribution to the relationship: Level of patient enactment, Level of integration, and Self-awareness. The following two scales pertain to the therapist's contribution: Level of therapist's enactment, Depth of interpretation. The last three scales examine the therapeutic dyad as a whole: Type of dyad refers to 11 OR dyads that may be enacted in the relationship on a developmental continuum going from primitive to borderline and neurotic dyads; Level of oscillation of the dyad; Affective valence of the dyad. In the validation study, the average interrater reliability for the ORRS scales is good (ICC = .72). The ORRS scale discriminated well between the three levels of personality organization evaluated with the PODF (Diguier et al., 2004), confirming criterion validity. Convergent validity ranged from moderate ($r = .30$) to large ($r = .61$) for five out of eight scales, and discriminant validity was moderate ($r = .32$, $r = .37$; Diguier et al., 2012). The authors conclude that the ORRS shows promising psychometric properties but call for further instrument validation to improve reliability and overcome the first study's limitations. Unfortunately, no other study has inquired about the psychometric properties of the ORRS, and the instrument has not been used since.

Discussion

This review serves as a timely update of Huprich and Greenberg (2003) work, which aimed to examine empirical studies concerning ORs performed in the 1990s. Consequently, the authors extracted 12 instruments for OR assessment. We conducted our study with the explicit goal of searching for instruments assessing OR; thus, we provide an updated, exhaustive list of relevant tools as they have been developed and utilized in the last two decades. Besides the most popular and validated tools, such as the SCORS, BORRTI, MOA, and so forth, some instruments could benefit from further validation, which may result in valuable resources for assessing OR.

The outcome of our review highlights the quantity and variety of available assessment tools for ORs, which reflect the complexity of ORs theory. The tools we retrieved assess different aspects of ORs:

1. the more cognitive, conscious representations of self and significant figures (e.g., the cognitive dimension of the SCORS);
2. affective states (e.g., the Separation Anxiety subscale in the TOR-SF);
3. general self and other representations (e.g., the STIPO and IPO sections on ORs);
4. representations of particularly significant others, such as parental figures (e.g., AORI, MORS-SF); and
5. the behavioral consequences of healthy/unhealthy ORs (e.g., the Social Incompetence subscale in the OR scale of the BORRTI, the Social Isolation scale of the TOR-SF, the Experience and management of aggressive impulses scale in the SCORS-G).

Some tools seem to be better suited for specific populations: the BORRTI was designed for patients with deficits in reality testing, so it can reliably assess OR in individuals with psychotic disorders; the MOR-SF is specific for mothers in the first 12 months of life of their infants, a critical period for the detection of risk in mother-infant relationships; the STIPO, IPO, PODF, and ORRS were all designed in the context of the ORs model of personality disorders, and might be particularly useful to assess patients with a borderline personality organization. Also, the assessment is carried out through various methods, which imply the evaluation of OR at different levels: self-report inventories tend to inquire about conscious representations, projective measures have easier access to unconscious experiences, and clinician ratings evaluate a posteriori the activation of ORs in the patient's narratives. Since OR theory comprises several complex, layered constructs that pertain to different levels of the individual's experience, with different theoretical conceptualizations behind it, the use of multiple measures or approaches when assessing ORs is advisable from both a theoretical and clinical point of view.

Four of the instruments we retrieved are based on Kernberg's theory of personality organization and therefore on the construct of ORs dyads: the STIPO, the IPO, the PODF, and the ORRS. While the first three are intended to assess personality organization in general, the ORRS was explicitly developed to evaluate ORs dyads; it is interesting to notice that the only tool for assessing OR that follows Kernberg's conceptualization has not been employed in the current literature. Clinicians who treat patients with personality disorders, and even more so clinicians who practice TFP, could benefit from the employment of the ORRS to better understand their patients' personality functioning, plan the treatment, and evaluate therapeutic changes. A clear understanding of the patient's inner object relational world may help the clinician manage transference and countertransference reactions and maintain adequate attunement to the patient's relational struggles. Another possible development for a more accurate and agile assessment of OR dyads may be the construction of an OR-focused self-report inventory based on Kernberg's personality organization theory.

All the instruments that we have found provide information about crucial characteristics of ORs, such as their degree of integration and differentiation. However, ORs also have a qualitative dimension, consisting of the actual content of self and other representations. A crucial step (i.e., strategy) of TFP is the identification of self and other representations activated in the therapeutic relationship through the metaphor of a play: the patient is asked to describe the “script” that she and the therapist enact during their interactions, as well as to identify underlying representations. In the TFP manual (Yeomans et al., 2015), we find some examples of dyads, inferred from clinical experience: bad, destructive child/punitive, sadistic parent; controlled, enraged child/controlling parent; unwanted child/uncaring, self-centered parent; and worthless child/scornful parent. A more detailed and empirically validated list of typical dyads, possibly related to specific personality structures, may help therapists better understand their patients’ functioning and the transference/countertransference reactions that occur in the therapeutic relationship.

Furthermore, this review could serve as a basis for the further validation of the AMPD, introduced in the third section of the *Diagnostic and Statistical Manual of Mental Disorders, fifth edition*. According to the AMPD, the individual’s functioning in interpersonal relations is central to the diagnosis of personality disorders (Clarkin et al., 2020): In fact, criterion A of the AMPD evaluates self and interpersonal functioning. Performance-based assessment measures seem to prove particularly useful in assessing and understanding criterion A constructs (Krueger & Hobbs, 2020): This review provides an updated list of valid and adequate options to assess such aspects of personality pathology in the perspective of the AMPD becoming the primary diagnostic model for PDs.

Limitations

We adopted a systematic review methodology for our study. We conducted our search on two of the most relevant databases for psychological science, APA PsycInfo and Pubmed, using punctual and relevant keywords and inclusion criteria. The screening process was conducted only by the first author, so its accuracy may be limited. Because of the intrinsic limitations of this methodology, some instruments to assess ORs may have escaped our investigation. For example, the Core Conflictual Relational Theme method (Luborsky et al., 1994) was only mentioned in one review retrieved in our search, even though it may be considered a valid and widespread assessment tool for object-relational functioning. Furthermore, we searched the databases in December 2021: All articles published after that date are not reported or discussed in our article.

摘要

评估客体关系 (OR) 的工具是精神动力学理论、研究和实践的基础。客体关系在诊断和治疗过程中起着重要的作用, 帮助治疗师更好地了解和管理患者的复杂的关系功能。OR 的临床相关性也被 DSM-5 人格障碍可选择模型的首个标准所认可。我们的目标是临床医生和研究人员提供评估 OR 的可用实证工具的最新综述。我们对 PsycInfo 和 Pubmed 进行了系统检索, 并从现有文献中检索了 42 种工具。其中一些评估工具在科学界已经确立。在不太受欢迎的工具中, 我们发现了一些显示出

良好潜力并可能获得新一轮验证的工具。我们鼓励在 Kernberg 的人格组织理论框架内发展现有的和新兴的工具, 并进一步研究二元客体关系的定性方面, 这可能有助于治疗师获得有关患者关系功能的更复杂精妙的信息。

关键词: 客体关系, 评估, 人格障碍

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