

Q METHODOLOGY AND CONTROL SYSTEMS THEORY

David M. Goldstein
Cherry Hill, New Jersey

ABSTRACT: Q methodology and control systems theory are jointly employed in a single clinical case involving ineffective interpersonal relationships. A Q sample comprised of 24 adjectives from the Personality Profile Test is administered under 19 conditions of instruction (e.g., describe yourself, mother, ideal mother, et al.), and the Q sorting produces three factors representing classes of interpersonal perceptions. The results are used with the client to discuss strategies for modifying interpersonal relationships with those individuals whom the factors represent.

Introduction

I have been using Q methodology and control systems theory (Powers, 1973) in my practice of psychology, and have found them helpful in understanding clients' problems better and in suggesting treatment strategies. I am continuing to refine my use of these tools and consider my present approaches open to modification, but would like to share my progress to date through presentation of a case in which Q methodology is used to identify important perceptual variables which, through control systems theory, are then used to think about the role of these variables in the person's interpersonal relationships.

Author's address: 801 Edgemoor Road, Cherry Hill, NJ 08034.

By way of overview, imagine that I have been seeing the client for several sessions, and assume further that it is clear that the person's interpersonal relationships play an important role in the presenting problem. Finally, assume that the person has agreed to explore his or her interpersonal relationships as a means of gaining insight. The client is initially asked to provide a description, in his or her own words, of a significant other person, and the description is then discussed. The client is then instructed to provide Q-sort descriptions of this significant other under one or more conditions of instruction.¹ After Q sorts have been obtained under all of the salient conditions, the factor-analytic results are presented to the client and discussed in terms of their meaning and implications for treatment goals and strategies.

The Case of Tom

Tom is a 33-year-old white male, divorced with no children, and working as a systems designer. His presenting problem was one of stress symptoms, including stuttering when speaking in front of co-workers. There is a past history of physical abuse by a stepfather and verbal abuse by his mother. There is also a past history of spending 10 days in a psychiatric hospital as a teenager for an episode involving fighting and punching holes in walls. He was in therapy with a psychiatrist for almost four years following the breakup of his first marriage. His expectation was that biofeedback therapy would be used to help him with his problem.

Tom had previously been given the Myers-Briggs Type Indicator, with which he was assessed as an ISTJ type (introverted, sensing, thinking, judging). He was also given the Millon Clinical Multiaxial Inventory, which showed him to be significantly high on scales for depression, avoidant personality, and passive-aggressive.

Tom provided Q sorts for 19 conditions of instruction to be described below (e.g., describe yourself, your mother, et al.), and the correlation matrix was factor analyzed using a modified

¹The Q sample consists of 24 adjectives, as described elsewhere (Goldstein, 1986). Briefly, three items each were selected from the eight scales (accepting, submissive, passive, depressed, rejecting, aggressive, assertive, and sociable) of the Personality Profile Test (Conte & Plutchik, 1986).

principal components analysis with an equimax rotation. The conditions associated with the first factor included all the ideals (ideal self, ideal mother, ideal father, ideal wife, ideal sister, and ideal brother) plus his girlfriend, ex-wife, sister Cathy, boss, brother Mike, and therapist (Goldstein); the Q-sort picture of his self during a trip with his girlfriend was negatively significant on the same factor. The most positive and negative factor scores associated with this composite of persons were as follows:

Most Like: good-natured, affectionate, tolerant, gracious, assertive

Most Unlike: quarrelsome, helpless, resigned, argumentative, belligerent

Thus, persons associated with the positive pole of the first factor are perceived as accepting, social and not aggressive (whereas his self with his girlfriend is the reverse), and this is his idea of how people should be ideally.

The second factor contained mother, father, brothers Art and Mike, and sister Carol, and the extreme factor scores were associated with the following items:

Most Like: outspoken, quarrelsome, belligerent, sociable, stubborn

Most Unlike: helpless, obedient, ineffective, mild, submissive

The second factor is therefore perceived as aggressive and not submissive, and seems to reflect the way in which Tom sees his family as a whole.

The third factor contains Tom's self and his perception of sister Marie, and is characterized as follows:

Most Like: ineffective, helpless, stubborn, depressed, affectionate

Most Unlike: argumentative, sociable, submissive, assertive, bold

Hence are those comprising the third factor perceived as depressed and not assertive, and this is the way in which Tom sees himself.

Discussion

The Q methodology results have identified three perceptual variables which Tom uses in classifying people. Are these controlled perceptual variables? In other words, does Tom have preferences in terms of the perceptual variables, and does he behave so as to obtain and keep these preferences?

Based on therapy discussions, it is clear that Tom wants to become less like persons in factor 3 and more like those in factor 1; i.e., he wants to become less depressed and passive and more sociable and accepting. Furthermore, he wants to become more like the factor 2 people with respect to their assertiveness, but less like them with respect to their aggressiveness. How Tom will achieve these preferences remains to be worked out in therapy, and why he has these particular preferences will be something that remains to be discovered in therapy.

For Tom, the world of people is divided into three classes, and being confronted with these factor-analytic results seemed to help him understand himself better: He understood the results, and agreed with them. He also wanted to know where to go from there.

The information presented to Tom helped us to understand the presenting problem better. Recall that Tom has fear reactions when he has to talk in front of other people. His reactions suggest that he is perceiving his audience as if it were comprised of factor 2 people; i.e., he is acting as though the people will be aggressive and not submissive, like his parents and certain brothers and sisters. Based on this inference, it was suggested to Tom that he pretend that his audience is made up of factor 1 people who will be accepting, sociable and not aggressive. He found this idea attractive and agreed to experiment with it.

The main issue behind Tom's problem is that he does not know how to deal with aggressive people, and that he anticipates that at least some of the people at the meetings which he must address will be aggressive. We discussed one individual in par-

ticular who acts as though he is jealous whenever anyone else comes up with a good idea. This individual is always finding fault with other people's ideas. Tom and I discussed how to deal with this individual at meetings. We also discussed the problem of how he could have dealt with his brother Art during a particular episode in which Art was acting aggressively.

The information presented to Tom helped us to understand his self image, which, as might be expected, was not very positive. He perceives himself as depressed and passive like his sister Marie (factor 3). His written description of Marie, expressed in his own words, portrayed her as having numerous psychological problems and as not being very successful, and so it was surprising to him that his Q-sort description of himself and of his sister emerged on the same factor.

Hence, Tom's self is on factor 3, how he is at his worst is on factor 1-negative, and his ideal self is on factor 1-positive. His girlfriend of five years is also on factor 1-positive. I suggested, and Tom agreed, that perhaps he does not feel worthy enough to ask her to marry him. Prior to this, Tom had contended that the reason he had not asked her to marry him was because he did not want to live in a house whereas she did. The Q methodology results are helping us get closer to possibly deeper reasons for his reluctance to ask her to marry him, and on the basis of these findings Tom agreed to explore the issue of marriage by asking his girlfriend if he is the kind of person she would really like to marry and by exploring any obstacles which she might raise.

The information presented to Tom also gave us some clues for restructuring his relationship with his family. Tom takes on the role of the responsible one in his family, and this is a frustrating role for him. I suggested, and again he agreed, that it was perhaps a good idea to focus on the factor 1 people in his family (i.e., his sister Cathy and brother Mike), and to cease trying to be something to the factor 2 people which they were unwilling for him to be.

Tom suggested some of the dynamics of his relationships with people as we were discussing the Q methodology results. Tom reacts to people whom he perceives as aggressive by becoming submissive; then he becomes depressed and passive. When he is frustrated by people who are accepting and sociable, he becomes aggressive and then becomes passive and depressed. It is plausi-

ble that Tom becomes depressed and passive in both cases in order to avoid conflict. Recall Tom's earlier history of being abused and of being hospitalized for aggressive, acting-out behavior. The control of angry feelings seems to be the goal of his behavior. Helping Tom to learn the difference between assertive versus aggressive behavior and to allow himself to be assertive seems to be the key to therapy with him.

Tom grew up in an abusive family environment in which competition was encouraged. He reports that after his hospitalization, he was different when it came to expressing angry feelings. He kept them inside until they "exploded," at which time he would yell and throw things, which is what he witnessed in his house when he was growing up. The kind of behavior was a major factor in the failure of his first marriage. Tom internalized the factor 2 attitude towards himself. He is never satisfied with his own performance, and always assumes that what he does is never good enough and could be better. This attitude is the probable basis for several problematic features of his conduct: His fear of speaking in group meetings, his avoidance of doing jobs around the house, and his avoidance of getting married again. The factor 1 attitude represents the way Tom wants to be towards himself and others. The factor 2 attitude is the way that he was brought up and the way that he still is sometimes towards himself and others. The factor 3 attitude is the way he has learned to be in order not to express a factor 2 attitude. Hopefully, he will no longer perceive himself in terms of factor 3 as therapy progresses and he changes in the direction of becoming a factor 1 person towards himself and others.

Tom remains in active therapy. Some progress towards the therapy goals have been made. Q methodology and control systems theory were helpful in formulating goals and in fashioning appropriate treatment strategies.

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