



## TO THE EDITOR...

Letters should be marked clearly 'Letter for publication in *The Psychologist*' and addressed to the Editor at the Society office in Leicester. Please send by e-mail if possible: [psychologist@bps.org.uk](mailto:psychologist@bps.org.uk) (include a postal address). Letters over 500 words are less likely

to be published. The Editor reserves the right to edit, shorten or publish extracts from letters. If major editing is necessary, this will be indicated. Space does not permit the publication of every letter received. Letters to the Editor are not normally acknowledged.

# Hypotheses and hyperbole

I WAS pleased to see the peer commentary treatment of evolutionary approaches to psychology, headed by John Archer's article 'Evolving theories of behaviour' (August 2001). Although there are ongoing issues with this field of psychology, and room for debate, the overall enquiry is valid. If nothing else, thinking about how far evolutionary theory can influence our models of cognition and behaviour will sharpen our conceptual tools. But, as Archer has made clear, the likelihood is that some novel predictions will be thrown up.

So, I am making the uncontroversial claim that evolutionary approaches should be taken seriously and treated as any other scientific endeavour. It might be the case that there are limitations to the application of evolutionary theory, but we ought not to second-guess these.

Given this, I was dismayed to see that sections of the critical peer commentary on Archer were not party to this rational approach. Instead of seriously addressing conceptual problems with the application of evolutionary theory, Rose and Rose, for example, produced a deal of negative hyperbole that was unsupported. For instance, they took some time to deal with Thornhill and Palmer's (2000) book on rape. This book was presented, albeit rhetorically, as promoting a narrow notion of rape behaviour with an accompanying adaptive argument for it. Thus rape, by this reading, is only coercive

sex when there is the possibility of reproduction, so forced anal penetration, and so on, is not rape. Rose and Rose note Thornhill's work on coercive sex in scorpionflies and claim that a simplistic comparison between scorpionflies and humans was made thereby 'discounting' the pain of rape victims and reducing those victims to 'the same ontological level as scorpionflies'. Furthermore, it was claimed that 'to the biologists such victims are just objects of research not human subjects active in the understanding of their own lives'.

I read Thornhill and Palmer's book and did not find crass comparisons between species. Furthermore, I recognised that the possible adaptive story for some forms of rape was one of a set of hypotheses that was partially supported but clearly laid out as a future question to be answered. But let us suppose, for now, that the characterisation of this book is

accurate. We are left with a narrow definition of rape. This might be better read as a focus upon a specific type of rape. Coercive, or forced sexual behaviour can take many forms and it is just possible that each of those proximate forms is 'motivated' by different factors. This does not appear to be an unacceptable possibility but one that deserves investigation. It might be wrong – but we won't know until we look. Jim McKnight has recently made a similar point about different types of male homosexual behaviour in his 1997 book *Straight Science*.

But even if you cannot accept my version of events up to this point, how are we to make sense of the other comments about reducing victims' ontological level, and so on? Really we know that Rose and Rose are arguing that the comparative work of Thornhill and Palmer in fact fails to account for the experiential element of rape

for the victim and furthermore that this is morally reprehensible, as their later comment about objectifying victims attests. (And again this is not entirely accurate, as the nature of the psychological distress is discussed in some detail in the later stages of the book.) This is not a conceptual point about the epistemological nitty-gritty of comparative work, but a small *p* political point. But if it were an epistemological point, and not a cheap political one, one would have hoped that Rose and Rose had noted the fact that Thornhill and Palmer's interest in rape was prompted by the rape of a friend – they wanted to understand this dreadful event and chose to do so as biologically based scientists.

I do not wish to go on with this kind of analysis as I think the point is made. Criticism of the level made by Rose and Rose is not part of the same process of scrutiny that shapes our hypotheses about the world and it should not be dressed up as such. If there were a political argument to be made, then, as Archer says, we would be in a better position to make it with solid and well-gathered hypotheses. If there were an argument to be made about adequacy of the methods of gathering those hypotheses then it will be better made with scholarly effort, and little to no hyperbole.

**Tom Dickins**  
Nottingham Trent University

*Editor's note: This letter has been edited.*

**Can we learn anything about human behaviour from scorpionflies?**

## Getting it right in theory

HAVING read Michael Eysenck's article 'How do European and US

psychology differ?' (July 2001), I was surprised to read that he saw the way forward



### Ever closer?

IN the article 'Forever the reluctant Europeans?' (July 2001) it seems to be taken for granted that 'European integration' is an ideal. The article goes on to conflate issues of European identity and endorsement of the European Union.

One might have a sense of European identity (alongside other sorts of

social identity) while being eurosceptic (i.e. questioning the nature and agenda of the European Union). At a guess, Swiss or Norwegian nationals will have a sense of European identity, while their nations have explicitly rejected membership of the EU.

**David Scott**  
7 Lower Park Road  
Chester

in research as 'combining theoretical understanding with full use of the experimental method'. While this may be a valued approach in cognitive psychology, the same surely cannot be said of social and personality research.

The primary value of theory-driven research is that it emphasises the pitfalls in drawing conclusions from experimentation aimed at attaining objectivity across time and space. It is only through naturalistic studies and discourse analyses that

the fluid changeability of personality becomes evident, inextricably linked to the social historical context. Experimentation should supplement these methods, not replace them. America's insistence on focusing on the individual in experiments whilst relegating its flaws only emphasises their hunger for answers regardless of whether they are the right ones.

**Jamie Murdoch**  
6 Lollards Road  
Norwich

## Monstrous campaign

AS a BPS member who works with people who have clinical needs, I am wondering if other psychologists share my concern about the advertising campaign of Monster.co.uk, which has depicted people 'hearing voices' and then going on to behave in bizarre and violent ways.

In one advert a man pushes over his boss on the advice of

a sinister voice. In another an employee 'roars like a tiger' while bursting into a room to negotiate his salary. In yet another a young man laughs maniacally and then suddenly hugs a woman who he hopes will soon become his boss. His laughing becomes very disturbed and the people around look very shocked at his behaviour – so the company concerned does realise that

## INFORMATION

■ I would like to get hold of a **Bene Antony FRT (Adult Form)** for use in my work at Rampton with people with learning disabilities. If anyone has one gathering dust in a cupboard somewhere, please get in touch.

**David Wilson**  
Consultant Psychiatrist  
Rampton Hospital  
Retford DN22 0PD  
E-mail: david.wilson@rampton-hosp.trent.nhs.uk

■ I AM a psychology and PGCE graduate and am currently supply teaching in primary schools. I am looking from some **voluntary clinical experience in the Merseyside area** and would be very grateful for any offers.

**Damian Wilde**  
17 Midhurst Drive  
Ainsdale, Southport PR8 3PX  
Tel: 01704 576004; e-mail: DJWilde@17midhurst.freemove.co.uk

■ I AM a trainee clinical psychologist researching the **working conditions of assistant psychologists**. I would be very grateful to hear from any assistant psychologists who would be prepared to fill in a **questionnaire** about their current posts.

**Philippa Saul**  
Oxford Doctoral Course in Clinical Psychology  
Isis Education Centre  
Warneford Hospital  
Oxford OX3 7JX  
Tel: 01865 514183;  
e-mail: philsaul@hotmail.com

■ I AM a researcher looking at **perceptions of adulthood**. I would be very grateful if people would take a few minutes to fill in an **online questionnaire** at [www.soton.ac.uk/ukTmu](http://www.soton.ac.uk/ukTmu). I am particularly interested in the views young adults have of adulthood. If anyone has suggestions of how to

recruit large numbers of young adults I would be most grateful.

**Fiona Ulph**  
University of Southampton  
Southampton SO17 1BJ  
Tel: 023 8059 5000;  
fax: 023 8059 4597

■ I AM completing a long-term work on the **development of children's imagination**, which includes my research into the stories children tell. I would like to contact others with interest or research in the broad area or the specific topic.

**Valerie Yule**  
57 Waimarie Drive  
Mount Waverley  
Victoria  
Australia 3149  
Tel: 00 61 3 9807 4315;  
e-mail: vyule@labyrinth.net.au

■ IF you work in North East England, Greater Manchester, East

Midlands or East Anglia and are interested in **joining an active medical-legal group of clinical psychologists** to provide reporting (and possible treatment) services approximately 2–5 days a month (or more), please contact me to discuss this.

**Rachel Green**  
Wellington Mews  
Wellington Street  
Cheltenham GL50 1XY  
Tel: 01242 263715

■ THE Psychotherapy Section is keen to locate and have sight of **editions 2, 3 and 13 of the Psychotherapy Section Newsletter**. If you can help please contact me.

**Kate Anderson**  
Secretary, Psychotherapy Section  
Department of Clinical Psychology  
Delancy Hospital  
Cheltenham GL53 9DN  
Tel: 01242 272000

## STRAIGHT TO THE POINT...

■ *On clinical training and 'relevant experience', Dawn Harbinson (Belfast):* Experience relevant to, and in preparation of, clinical psychology training can be gained in ways other than through assistant psychologist posts. Given that there are more people seeking assistant posts than there are vacancies, it would be prudent to recognise that not everyone who is suitable for clinical training will get the opportunity to be employed as an assistant psychologist. Therefore other relevant experience should be taken into account at selection.

*Andrea Davies and Sally Playle (assistant psychologists in North West Wales):* Assistant psychologists, support workers and voluntary workers probably have more client contact than a trainee, giving these roles vital importance in developing the basis of good clinical skills. They also provide the opportunity to see how theory works in practice. Can this be gained during a taught, theory-based undergraduate course? Yes, the theory will be fresher; but clinical psychology is more than theory – it is essentially about people.

■ *Sandy Hobbs (University of Paisley) on advertising at the Centenary Conference that mixed scientific psychology and spiritual healing:* What are the defining features of an academic discipline or profession called 'psychology' which could possibly encompass both sorts of approach? This seems to me a profoundly important question, because without a satisfactory answer, whether there is such a profession as 'psychologist' is in doubt. And if there is no coherent meaning that can be given to the words 'psychologist' or 'psychology', why should such a body as the British Psychological Society exist?

these are disturbing behaviours to exhibit.

That these adverts are 'jokes' and unlikely depictions of real events is not the point. They reinforce the view that people who hear voices are given to sudden, bizarre and

even violent actions. The public is already poorly informed about people with mental health problems without this sort of stereotyping.

I hope that other psychologists are similarly concerned. Perhaps the Society

could consider a complaint to the Advertising Standards Authority?

**Allan Skelly**  
*Ealing Community Team for People with Learning Disabilities*  
London W7

**Peter Kinderman, Honorary DCP Press Officer, replies:** *The stigma of mental illness is real, and can kill. People with psychological problems are at risk from verbal and physical abuse and, worse, from ill-informed and hostile members of the public. They face daily discrimination in employment and housing.*

*The Division of Clinical Psychology fully endorses Allan Skelly's comments on the Monster.co.uk advertising campaign. We believe*

*that all members of society have a responsibility to avoid reinforcing dangerous and stigmatising myths of mental illness. This includes advertising agencies.*

*Allan Skelly will be pleased to know that the Society has made a formal complaint to the Independent Television Commission. We join a growing list of complainants criticising Monster.co.uk. Thus far no complaints have been upheld. It will be interesting to see if the Society's letterhead carries any weight.*

## A moral obligation in aca-media?

READ with interest Tomás Campbell's letter (July 2001) arguing that giving professional opinions to the media 'demeans' psychology. The 'media don' is now almost a resident fixture on many television and radio shows.

It has been my belief for some while now that we should concern ourselves with the world of 'aca-media' and that where possible we should be disseminating our work to the widest audience possible. In fact, I would almost go as far as to say that we have a moral obligation to do so.

Academic popularisers come in for much criticism, but there is little doubt that popularising science (including psychology) is very difficult because such communicating primarily involves simplification without distortion. I would add that newspaper and magazine articles are the hardest media for psychologists to get a message across, as a 10-minute interview is often distilled down to a 15-word soundbite.

I am not for one moment arguing that all media dons should be highly valued as there are certainly individuals who do academia a disservice. However, the rise of the media

don should not be seen by academics in purely negative terms. It serves a valuable educational function; and if the function is not working or is

distorted, then we often only have ourselves to blame.

**Mark Griffiths**  
*Reader in Psychology*  
Nottingham Trent University

## BRIEFING AND DEBATE

### Reform of the Mental Health Act: Implications for psychologists

*At the Society's London office*

*Tuesday 30 October 2001, 12 noon to 4.30pm*

The Professional Affairs Board invites BPS members to a briefing and debate on the implications for psychologists of the proposed new Mental Health Act.

The provisional outline of the afternoon is as follows:

12.00–1.00	Buffet lunch
1.00–1.45	Briefing by the PAB working party: The proposed changes to legislation; Implications for psychologists; What the BPS is doing and should be doing
1.45–2.00	A service user perspective on the likely impact of the proposals
2.00–2.45	First debate: 'This house believes that the concept of personality disorder is a useful one in work to reduce risk'
2.45–3.00	Tea
3.00–3.45	Second debate: 'The clinical supervisor role is an appropriate one for psychologists'
3.45–4.30	Plenary discussion and action points

*For further information or to request free tickets please contact Christina Docchar on 0116 252 9506 or [chrdoc@bps.org.uk](mailto:chrdoc@bps.org.uk)*

## EMDR – Consider it seriously

THE article ‘Eye movement desensitisation and reprocessing. A matter for serious consideration?’ by Jeanette Senior (July 2001) points to a number of interesting questions and areas of uncertainty regarding EMDR, such as its expanding range of clinical applications, its mode of action, and its relationship with other forms of psychological therapy. My own concerns are more that very often people who are suffering with treatable psychological conditions are incapacitated and suffering for far longer than is necessary because EMDR is *not* used.

Clinicians who become skilled in the use of EMDR often find that conditions that might at one time have seemed difficult and very time-consuming to treat will respond

remarkably quickly with this approach. The method draws upon elements of many other therapies. Thus, like behaviour therapy, it involves exposure to anxiety and feared situations; like cognitive therapy, it addresses crucial schemas and self-related cognitions; like psychoanalysis, it involves free association; like biological therapies, it induces neurobiological changes. This is probably why it appeals to open-minded clinicians of a wide variety of backgrounds. The various therapeutic elements seem to combine synergistically, and the eye movements or other bilateral stimulation accelerate the process enormously.

EMDR is not a ‘miracle cure’. In my experience it works best for PTSD (and other conditions relating to

significantly adverse experiences in childhood or adulthood), panic disorder, phobias and other anxiety states. Severe or complex psychopathology and deeply rooted personality patterns still require slow and painstaking endeavours using older therapeutic methods, such as cognitive or psychoanalytic therapy. EMDR is officially taught only to those who have

established expertise in an existing reputable therapeutic approach.

What I personally find most interesting to consider are the implication of EMDR for understanding the natural processes of psychological (and somatic) healing, which EMDR seems to facilitate.

**Phil Mollon**

*Lister Hospital  
Stevenage*

### ‘I say, you fellows’

MY old games teacher would probably have had a different interpretation for the finding that football players perform worse than rugby players at tests of executive functioning (‘Heading for trouble’, Centenary Conference

report, July 2001). I feel sure he would have said, as he so often did, that football is a game for gentlemen played by hooligans, while rugby is a game for hooligans played by gentlemen.

**R.H. Thomas**

*80 Belmont Road  
Bristol*

## Engaging with the drugs debate

**M**ANY relevant issues have been addressed with respect to the legalisation of substances currently prohibited under the Misuse of Drugs Act 1972. I notice a dearth of contributions pertinent to those with a professional interest in psychology – the therapy versus crime prevention debate serving more of a focus for traditional liberal/authoritarian

dichotomies than fuelling constructive suggestions on effective government policy.

A few thoughts strike me as relevant, though I must make it clear that I am not someone with direct professional involvement with this topic.

Cannabis is often cited as a gateway drug – opening the door to heroin, cocaine, and so on. However, many users of the former do not ‘progress’ to the latter. Why? I am not excluding the significance of social factors, but feel that maybe both personality psychology with respect to individual differences and cognitive psychology with respect to decision-making processes may be a relevant factor. By presenting all drug users as a homogeneous psychosocial group, prohibitionist policy makers are able to justify their arguments on grounds of

concern for public welfare rather than acknowledging that drug use may be a form of social behaviour that is not necessarily pathological in intent or outcome.

With respect to all illicit substances covered by the 1972 Act, it might be worth exploring how much use of any substances is related to the very fact of their being illegal. This in turn would be inseparable from issues to do with youth culture, peer groups and social norms. To turn the question round, if illegality is a key factor with respect to usage, legalisation could result in wholesale reduction of drug abuse within specific age groups. This question seems to be vital and I would be interested to know if any research is currently being undertaken on this topic.

Finally, with respect to social behaviour, I have heard descriptions of drug addicts as

being engaged in social rituals the loss of which on the cessation of detoxification, may be a significant factor with respect to their recommencing drug use. Given that these rituals are focused on the illicit obtaining and use of the substance concerned, might the legalisation of drugs under the 1972 Act facilitate addicts to refrain from subsequent use? What research has been done with respect to this aspect of user behaviour?

I am not advocating that academic psychology should ally itself with either side of this important discussion. I am suggesting, though, that failure to engage with the debate itself, would greatly undermine the ability of the discipline to offer insight into this and other matters that may be deemed to fall within its remit.

**Miriam Moss**  
191 Stainbeck Lane  
Leeds

### Talking scents

**T**HE smell of a freshly opened *Psychologist* magazine gives me a sore throat. I wonder if any other readers are similarly afflicted?

**Jim Cromwell**

National Deaf Services  
London SW12