



## 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.

# Mental Health Act reforms – social control?

**T**HE article by David Pilgrim and David Hewitt on Mental Health Act reform (October 2001) leaves me feeling very concerned. The article examined the practical implications and legal dilemmas for psychologists in accepting the new 'clinical supervisor' role. It explained that this new role would mean that some psychologists would have the power to compulsorily detain someone under the Mental Health Act.

The article went to great lengths to explain the dilemmas and difficulties for psychologists – but what about those who are the potential recipients of such services? Are they not to be considered?

I am an undergraduate psychology student, so I have no experience of clinical practice. But I do have experience of psychiatric treatment, and I know how it

feels to be threatened with detention under the Mental Health Act. Anyone who has had involvement with user or survivor organisations will be aware that many people find psychiatric treatment frightening and damaging. The very prospect of coercion is terrifying, and the social stigma of detention under the Mental

Health Act is shameful and degrading.

I sought psychiatric help voluntarily in the belief that the treatment would be safe, effective and humane. Unfortunately I was wrong. Psychiatric drugs are not safe. They can have dangerous and frightening side-effects. Psychiatric hospital is not

a therapeutic environment. I found it to be a bizarre and threatening place.

People in distress should be able to trust psychologists, but they will not be able to trust someone who they believe may 'section' them. Certainly, as a result of my experiences, I will never trust another psychiatrist or mental health nurse again.

Section 1 of the BPS *Code of Conduct, Ethical Principles & Guidelines* states: '...they [psychologists] shall hold the interest and welfare of those in receipt of their services to be paramount at all times.'

Compulsory detention is not about 'interest and welfare', it is about social control.

I hope the profession can find a better way forward than this.

**Janice Hartley**  
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## Heavier than ultramarine?

**R**EADING the article 'Is a jumper angrier than a tree?' in the September issue reminded me of a paper I read sometime in the 1960s in a reputable journal in the field of social psychology.

The researchers had presented standard scales of the type used in social research studies – Likert scales, Osgood scales, true or false scales, and so on – to large numbers of adults. All that was missing was a topic. People were generally willing to fill in these scales, without knowing what the subject was. The general finding was that people preferred the positive end

of the scales, but not the most extreme position. They also preferred to say 'true' rather than 'false'. The authors of the paper made the point that if this is the underlying preference or prejudice, to use these scales in

social research could often be misleading, since there is this built-in bias operating all the time.

I was sorry to see that the authors of the article in *The Psychologist* had done so little

work with adults, as it seems to me quite probable that similar effects would be found with adults, provided that the question sounded like an adult question rather than a child's. For example, one could ask 'Are civil servants more computable than trade unionists?' or 'Is scarlet heavier than ultramarine?' It seems clear that asking questions is not a simple matter, and that answers are not always all what they may seem.

**John Rowan**  
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## Consciousness – a hard problem

It is a brave person indeed who assumes that one day psychologists will solve the problem of consciousness. Susan Greenfield attempted it last year, with her implausible constructive metaphysics, and Susan Blackmore attempts it yet again, this time by stating that we psychologists are in a 'silly muddle' ('State of the art: Consciousness', October 2001).

But Blackmore herself asks some very muddled questions, to which the answer is self-evident if she were really to sit down and think things through. One such question is: Could we develop a theory of mind unconsciously? No is the correct answer, by definition.

A first year philosophy undergraduate would have easily put paid to that one.

The problem with consciousness is that it has to be assumed before one can discuss it. If it were ever to be explained away, where would this leave the truth of that explanation? But at least Blackmore has the insight to observe that we are so deep in the field that we cannot see it. That's one of the problems and so far no one has seen an obvious way out.

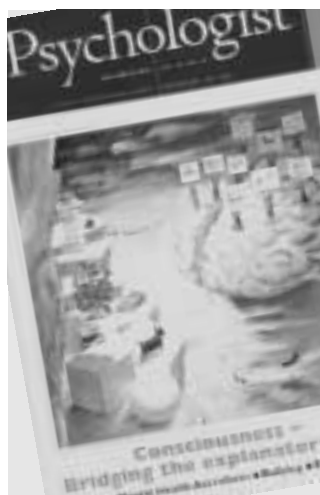
### Allan Dodds

Chartered Health Psychologist  
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WRITE regarding Susan Blackmore's fascinating article on consciousness. I am intrigued by her question 'Why did consciousness evolve?'. Without a decent working definition of 'consciousness' this question is of course impossible to address. I wonder whether a better question would be 'Why did the belief in consciousness ever evolve?' It is easier to find, certainly at a societal level, solid arguments why a belief in the intents,

motives and awareness of others is beneficial.

Perhaps consciousness, whatever it is, at least is a



prerequisite for belief-holding. Then so be it. We do not require an explanation for its existence *per se*, which I suggest is a lot more intuitive and a lot easier to reach a consensus over.

I found myself today reading Blackmore's article and flexing my wrist. Apparently I was doing it from my own free will, although the only reason I, perhaps, decided to do so was Blackmore's request that I do it. I would never have done it otherwise. It *felt* as if I had decided to make that movement, but I don't think I *decided to make that decision* to act. Susan Blackmore made it for me. Perhaps she only made that request having been asked by the Society for an article. The seed of my flexion was not a discrete event in my mind/brain. Indeed there was no seed. The flexion of my wrist at that point was a result of the cumulation of a myriad influences including DNA of my patient at the time I read the article, the topic breadth of *The Psychologist* and the atypical lack of paper in my inbox.

I just retrospectively justified it as my own free will because I'm wired to do that. It

suits me, as it suits us all. The alternative belief that all our actions are inevitable consequences of preceding events strips us of moral obligation and would be disastrous.

### Jim Cromwell

Chartered Clinical Psychologist  
South West London and St  
George's Mental Health NHS  
Trust

IN raising the difficult question of the evolution of consciousness by asking why it evolved, Susan Blackmore is making the assumption that when consciousness originated, it had a function and therefore was an adaptation, arising by Darwinian natural selection. A more parsimonious approach would be to put this assumption to one side and

ask instead, *how* consciousness evolved.

For example, one well-formulated theory (Rosenthal, 1997) suggests that consciousness arises as a higher order thought or metacognition. If this is the case, then the evolutionary origin of consciousness is more plausibly viewed as an exaptation (a new effect increasing inclusive fitness). Darwin's theory of natural selection cannot satisfactorily explain the emergence of any new, higher order thought or metacognition.

### Michael Church

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### Reference

Rosenthal, D. M. (1997). A theory of consciousness. In N. Block, O. Flanagan & G. Güzeldere (Eds.), *The nature of consciousness: Philosophical debates*. Cambridge, MA: MIT Press.

## Online access – readers to the rescue

HAVING recently moved to a commercial organisation without access to PsycLIT or BIDS, I completely empathise with Margret Geraghty (Letters, October 2001) regarding difficulty of access to online databases. There are, however, a number of ways round this problem.

PsycINFO (formerly PsycLIT) is available online from the American Psychological Association and can be accessed for a 24-hour period for \$9.95 ([www.psycinfo.com](http://www.psycinfo.com)). View a demo of the PsycINFO system at [psycinfo.apa.org/demo/](http://psycinfo.apa.org/demo/). MEDLINE is an online database of life sciences and biomedical abstracts and a yearly subscription costs \$150 ([medline.cos.com](http://medline.cos.com)). I have also found that abstracts from many journals are available online, and so I look at these every few months.

Databases and journal websites will usually give only abstracts, but full journal

articles and books can be obtained from the British Library Document Supply Centre, which is available to individuals and other organisations as well as academic institutions ([www.bl.uk/services/bsds/dsc](http://www.bl.uk/services/bsds/dsc)).

I would be interested to know of any other resources readers have found. By sharing this information we can spread the message that you don't have to be in an academic institution to keep up to date with the world of psychology.

Angus McDonald  
Consultant Psychologist  
Team Focus Limited  
Maidenhead

MARGRET Geraghty commented on the prohibitive cost of online psychology databases for private individuals outside colleges. It is possible to access PsycINFO fairly cheaply by becoming an international affiliate of the American Psychological Association. The total cost of

membership and PsycINFO access is roughly £120 a year, which gives you web-based access to the last three years of journal records.

**Marc Adams**  
Walkley  
Sheffield

**H**AVE great sympathy with the predicament described by Margaret Geraghty – being denied access by her former college to the use of online databases.

If they are not available on the web, then is there not a case for the Society offering such a service to members who cannot gain access to them in their local area?

I do not know how far the Society's library has moved to embrace the world of IT, but this seems to me to be one way that it could do so. Or would this be something to be negotiated with the University of London library? I do urge the Society to accept this as a service it should be offering to members and to explore the means by which it may be best achieved.

**David Nelson**  
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Charlestown  
Dunfermline

**Stephen F. Walker, BPS  
Honorary Librarian, replies:**  
Having just received my APA

*International Affiliate Statement for 2002, to the responses above I can add the detail that the basic fee is \$27, and one must order at least one APA publication (but the American Psychologist is only \$12 surface mail) to have the option of paying \$149 for a year's access to PsycINFO 'Lite', which goes back only as far as 1999. Although the form says that there is free electronic access to each journal subscribed to, at present this is very patchily implemented.*

*For members of the Society in the South East, an additional option is using the University of London library in Senate House in Bloomsbury (www.ull.ac.uk), where the BPS library is housed. Members who appear on the Chartered list can obtain a reading-only ticket by presenting identification at the membership desk, and others can do so by contacting the Leicester office for a letter of introduction. Free web-based access to PsycINFO can then*

*be obtained by asking to be logged on in the Middlesex South reading room; the citation indexes formerly on BIDS, now moved elsewhere, are also available.*

*Unfortunately these databases can only be accessed by those physically present in Senate House (which also contains a wide range of printed materials in psychology, social sciences and the humanities). In response to Margret Geraghty's letter and questions raised at the Scientific Affairs Board, I am exploring with Senate House the possibilities of arranging for remote access to electronic databases for BPS members. However, the issues of payments for extensions to licences are complex, and my guess is that this is a medium- to long-term prospect rather than a short-term likelihood. It is hoped, however, that there will soon be information about the BPS library, together with related links, on the Society's website.*

## GO 'HEAD TO HEAD' IN THE PSYCHOLOGIST

Debates are a great way to make your case in front of a large psychological community. See January and September for examples – you can also find them on the website.

□ If you have an idea for a topic and two participants or would like to take part in a debate yourself, contact the Editor on [jonsut@bps.org.uk](mailto:jonsut@bps.org.uk); tel: 0116 252 9573.

## INFORMATION

■ I AM a psychology graduate who intends to pursue a career in clinical psychology. In order to do so, I would like to gain some **voluntary practical experience in clinical psychology** with guidance from health professionals so as to increase my chances of gaining a place for clinical training. I am particularly interested in London area and/or the southern region.

**Diana Rofail**  
Tel: 07904 105504; e-mail: [diana@rofail.freereserve.co.uk](mailto:diana@rofail.freereserve.co.uk)

■ I AM undertaking a PhD study examining the outcomes of a range of **psychodynamically oriented treatments currently used with children who are believed to have disordered attachment**. The study will incorporate structured interviews to investigate perspectives of therapists, parents/carers and children upon treatment outcomes. I would greatly appreciate

hearing from any professionals working in this area who might be interested in taking part in this study. This involvement would entail a preliminary discussion followed by a structured interview of no more than one hour.

**Ruth Bullivant**  
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■ I WOULD be grateful if readers could help me with two matters. Firstly, I would like to know if any health trusts are using **acetylcholinesterase inhibitor therapy with people with Down's syndrome who have developed dementia** of the Alzheimer type; and if so, what their experiences are. We are considering arguing for its use in our trust. Secondly, I would like to know of any **neuropsychological tests**

that have been **standardised or translated for use with Arabic-speaking populations**.

**John Rowe**  
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■ HAS anybody a hidden, unwanted **tachistoscope (or two)** gathering dust that they would be willing to donate to my A-level psychology course? Teaching memory and forgetting to my 40-odd lower-sixth pupils it struck me how we could replicate so many of the classic studies.

**Tony Pitt**  
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■ I AM a student of psychology at the University of Braunschweig,

Germany. I am in my third year of studies and I would like to gain some **voluntary practical experience** for two or three months during summer 2002 either in an institution, a hospital or with a self-employed psychologist. My interests are in clinical and counselling psychology.

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■ COMPLETE runs of **BPS publications free** to anyone able to collect them: *Bulletin* January 1973 to December 1987; *The Psychologist* January 1988 on; *Clinical Psychology Forum* 1986 on.

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## Time to recognise net gains, not just losses

**I**N their article 'Caught in the web' (October 2001) Shepherd and Edelman fail to take account of the BPS 2000 London Conference, which was on modern technology and at which no less than 17 papers and a seminar were dedicated to the topic of human-computer relations (BPS, 2001). In a brief overview of previous research they focus on an association between the use of the internet and social phobia without making any attempt to differentiate between the different ways in which people predominantly utilise the internet: surfing/research, e-mails or chat rooms. They speak of 'excessive use' without giving any definition and provide two examples of 'typical' cases where social phobia is associated with use of the net. The search for personality traits to identify those at risk of 'addiction' is, they admit, concentrated on those who are 'shy, introverted or socially withdrawn', without making the necessary clear distinction between these groups.

Since the personal

communication from Shapiro that they mention refers to persons with a life-time diagnosis of social phobias of whom nine out of a sample of 20 were internet dependent, clearly the use of the internet cannot have been instrumental in causing their psychopathology. According to Briggs 'over half of Americans build relationships online, and the UK is not far behind' (BPS, 2001, p.131), and Charlton has also argued against the use of DSM-derived criteria stating that they lead to overestimates of the prevalence of addiction to computer-related activities (BPS, 2001, p.132). Our own research (Stokes & McDonough: BPS, 2001, p.147) led us to conclude that there were marked differences between US- and UK-based groups, with the former's greater familiarity with the use of e-mail and emoticons, and that the groups differ in content as to the proportion of factual and personal support type posts. The tenor of Shepherd and Edelman's report seems to favour a pathological view of the net rather than a life-enhancing one.

Furthermore, membership of e-groups often leads to face-to-face encounters, offers of assistance and further contacts than would be possible if it were not available. 'Attrition in social skills'? I think not. 'Decrements in nonverbal communication...and verbal skills'? Hardly. The only sentence which makes sense for future work is 'Whether social phobia leads to excessive internet use and whether such use is to the detriment of effective communication skill

in real-life contact can only be established via carefully controlled longitudinal studies using suitable comparison groups'. In my experience this piece of psychobabble normally translates as a plea for further funding.

**Joan E. McDonough**

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### Reference

British Psychological Society (2001, August).  
*Proceedings of The British Psychological Society*, 9(2). Leicester: Author.

## FOUR HOURS A WEEK

**P**LEASE note that a misunderstanding regarding my research was reported in the June issue (Centenary Conference reports, p.313). Borkoles's intervention is four hours a week by negotiation, rather than four hours of exercise a day.

**Erika Borkoles**

*Leeds Metropolitan University*

## Narrow vision

**A**S someone who has spent a large part of his professional life observing others, mostly in school contexts, I can't agree with Peter Collett's views about the relevance of *Big Brother* to the work of psychologists ('Keeping an eye on Big Brother', October 2001). All social situations have their boundaries, but the *Big Brother* set-up is just too limited. We merely learn how certain people (those who volunteer to appear in such programmes) are, in subtle ways, encouraged to behave in certain bizarre social contexts. If we are interested, for

example, in exploring the function of 'gossip' in everyday life, there is nothing here that will help us.

The most interesting question is why so many people are besotted with the programme. Apart from the much commented on prurient motivation, perhaps they do regard it as illuminative of 'what people are really like'. If so, it is worrying to think we live in a society where people identify with such a narrow vision of what humans are capable of in difficult circumstances.

**John Quicke**

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