

## Psychological Illusions: Professionalism and the Abuse of Power

**Dr. Tana Dineen**

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*Man's major foe is deep within him. But the enemy is no longer the same.  
Formerly it was ignorance; today it is falsehood.*

Jean-Francois Revel  
*The Flight from Truth*

Power has long been a focus of attention for psychologists. In contrast to Freud's preoccupation with sexuality, power formed the dominant theme for Adler's approach to psychoanalysis. Subsequently, power has been studied in relation to interpersonal aggression, social dominance and family dynamics.

In recent times, as Freud's theories have once again taken hold, a bizarre but titillating fusion of the concepts of power and sexuality has taken place within our society. As a consequence, the term 'abuse of power' has lost its connotative breadth; the accepted meaning has been diminished so that the term now implies little more than a form of sexual abuse.

The public is inclined, when thinking of 'power' and 'abuse' within the context of 'psychology', to conjure up images of men in positions of power harassing, manipulating and coercing patients and students into illicit sex. These steamy images not only keep public attention focused on individuals within the profession but also stimulate the imagination, making it easy to apply psychological concepts to identify individuals from other walks of life, such as politicians, celebrities, school teachers and coaches, as abusing their power.

The danger is that each of these publicized cases is like a 'tree' that serves to obscure the view of the 'forest'. In staying focused on these often sensationalized stories, we fail to notice and to address, a much larger problem. In expressing outrage about individual cases of alleged sexual abuse, we lose sight of a pervasive and rampant abuse of power by the mental health professions themselves. It is this abuse of power committed on a grand scale in the name of professionalism that devalues, exploits, trivializes and victimizes people throughout society.

At a recent conference on professional ethics at Texas A&M University, (The Third International Conference on Professional Ethics, Texas A & M University (Kingsville). February 16<sup>th</sup>, 1998.) the organizer, a professor of philosophy and a pleasant man close to retirement, expressed concern about many ways in which such abuses are affecting academia, of which two are particularly relevant to this topic. The first was the worry he had about the dramatic change in professor-student relationships. He spoke sadly of how he and other professors hesitate to interact one-to-one with students - especially female students and how painfully aware they have become that a look can be misinterpreted, a word can be misunderstood, and any action can become a cause for complaint. Secondly, he talked of the impact of the 'Americans with Disabilities Act' legislation which, when introduced, was intended to address problems encountered by those who suffered serious physical disabilities. Now he saw it as having become so psychologically stretched, through the use of such loosely applied labels as Attention Deficit Disorder (ADD), that virtually anyone could qualify for a disability certificate. And, since having a certificate can allow a

student to hold the professor responsible for a passing grade, he was seeing academic achievement, pride and even honesty being eroded, and feeling often quite helpless in the face of demands for special treatment.

While these are only two examples from the professional life of one academic, they illustrate the noxious influence of psychology in our society and provide a glimpse of "the forest" - the abuse of power on a larger scale.

When we hear of the abuse of power by individuals, we need to look behind these reports to examine the role of psychology and to consider how it may be misusing its position and influence. We need to consider the possibility that it is the profession itself which is victimizing people by helping them to reinterpret events in such a way that they can then experience debilitating consequences. And to recognize how it targets women, rendering them wounded and damaged, and casting them in the role of adult children who are incapable of taking responsibility for their actions - their mistakes, their shortcomings, or even their romantic conquests.

*Cui bono?* Who gains by this revisioning of human experiences? Ironically it is those people who identify and decry the abuse of power, whose job it becomes to assist the victims as they deal with the emotional wounds said to have been inflicted.

The profession of psychology is responsible for the creation of most of the concepts employed in accusations involving the abuse of power. It is psychologists who coined many of the terms and who took the initiative not only to form and but also to legitimize the notions. And it is psychologists who benefit most from the contamination of society by the uncontested acceptance of these ideas, which people believe reflect genuine "psychological expertise."

*Manufacturing Victims: What the Psychology Industry is Doing to People* (Dineen, Tana. *Manufacturing Victims: What the Psychology Industry is Doing to People*. Montreal: Robert Davies Multimedia Publishing, 1998) is a book which shows in explicit detail that psychology has a vested interest in identifying instances of abuse of power. It identifies a paradigm through which victims are manufactured and then converted into patients/clients for whom psychological services must be purchased. To put it in a visual form:

**PERSON => VICTIM => PATIENT => PROFIT/POWER**

It is through such processes that psychologists gain social status and manoeuvre themselves into positions from which they can influence governments, media and the courts.

How many times has one heard that the "victim" was referred for counseling, that the accused was ordered into treatment or that sensitivity training was made a condition of disciplinary action? All of these therapeutic orders are based on the unquestioned assumption that psychologists have the specialized knowledge and the powerful skills which make them uniquely qualified to facilitate healing and to influence change. But do they?

In the Fall of 1969, while monitoring the diagnostic decisions made by psychiatrists in an Ontario general hospital, I began to have serious reservations about the opinions and practices of mental health experts. These doubts led me, for several years, into a research area that questioned the very foundation of mental health services (Dineen, Tana. *Diagnostic Decision Making in Psychiatry*. Doctoral Thesis, University of Saskatchewan (Saskatoon), 1975.) During my many years of clinical work, I never lost touch with these fundamental concerns. When I closed my practice in 1993 it was because these nagging doubts were sounding an alarm. Mental health professionals

had become too influential - too arrogant, too powerful. I had seen too many bogus ideas adversely affect the lives of too many people.

While remaining a licensed psychologist in two Canadian provinces, I have forced myself to step back and take a cold hard look at my profession. What I now see being done under the name of psychology is so seriously contaminated by errors in logic, popular notions, personal beliefs, and political agendas and it is doing so much harm to people that I can no longer bite my lip. Thus, I find myself in this strange role of working to curb the pervasive influence of my own chosen profession.

Long ago I lost any expectation that effective corrective actions would come from within the profession; so, I find myself most often now addressing my concerns to people outside my profession, hoping to find among them skeptics who are willing to think critically about America's love affair with psychology.

The former British Prime Minister, Benjamin Disraeli, wrote that "All power is a trust - that we are accountable for its exercise - that, from the people, and for the people, all springs, and all must exist." (Disraeli, Benjamin. *Vivian Grey*, Book vi, Chapter 7). Unfortunately, it seems that my profession has lost sight of this trust and that, by autocratically exercising power in its own interest, it has broken its covenant with those who place their trust in psychologists.

Before examining briefly several ways by which psychology has gained, and then proven itself unworthy of, this trust, two terms I will frequently use require clarification:

*Psychologist* refers not only to licensed psychologists but to psychiatrists, social workers, family & marriage counselors and the whole array of certified or self-proclaimed "experts" who sell opinions, assessments, theories, therapies, counseling and advice.

*Psychology Industry* refers to the business of producing and promoting psychological products. When people think of industries, they tend to think of automobiles, computers, cosmetics or entertainment; of easily identifiable products, with price-tags, warranties and trademarks. Such industries are visibly defined by their products and by their boundaries. The Psychology Industry, being much broader, less defined (or definable), is harder to pin down. At its core, are psychology, psychiatry, psychoanalysis, clinical social work, and psychotherapy. (Henry, William E., Sims, John H., and Spray, S. Lee. *The Fifth Profession: Becoming a Psychotherapist*. San Francisco: Jossey Bass Behavioral Sciences Series, 1971.) No longer can clear distinctions be made between them; so, the term Psychology Industry comprises the services of all five of these mental health professions. And it encompasses, as well, the ever expanding array of therapists, counselors and advisors of all persuasions, whether licensed, credentialed, proclaimed, or self-proclaimed. In addition, this term acknowledges that around the edges of the industry are others whose work, whether it involves writing, consulting, lecturing, or even movie-making, relies on the Psychology Industry which, in turn, benefits from their promotion of all things psychological.

### **The mystique of Science.**

Since the age of Enlightenment, science has come to be respected as providing the power to both understand and control nature. The focus for hundreds of years remained on the conquest of the physical/material world; then, at the dawn of the 20<sup>th</sup> century the psychological world

came to be viewed as a new frontier - and it seemed that human nature too might be tamed. Psychology was heralded as a science which held great promise.

Thirty-five years ago I was drawn to the discipline of psychology by the intriguing questions it asked. I respected the ongoing efforts to apply the scientific method to understand human nature and to bring the disturbing and destructive aspects of human behaviour under control. For almost three decades I worked as a clinician and a consultant striving to apply that knowledge. But now the profession gives too many answers and asks too few questions; the humble curiosity it once had has given way to arrogant certainty and crass marketing. The quest for knowledge has been replaced by the search for products to package and the strategies which will increase sales.

Most of psychology can no longer legitimately claim recognition as a science. Clinical experience and untested theories are exalted, allowing opinions and personal beliefs to be presented as if they constitute scientifically-based knowledge.

As far back as 1949, a report by the American Psychological Association (APA) Committee on Training in Clinical Psychology expressed concern in writing about this trend:

There is an over-emphasis upon training in clinical techniques at the expense of education in psychological theory and research methodology. It would seem that this emphasis is due, on the one hand, to pressure from students and field agencies, and on the other, to the residue of our own history of fifteen to thirty years of clinical psychology which developed as a practice almost entirely limited to the use of tests. Perhaps this is not unexpected. As a profession we are still somewhat gropingly exploring and finding our way. Perhaps because there is still considerable and reasonable doubt concerning the validity of much of our knowledge and theory in the field of personality and clinical problems, we are inclined to devote much attention to tangibles such as techniques which can be acquired rather easily and give immediate evidence of specialized knowledge... Major effort must be exerted at this stage of our development to analyze and test many of our basic assumptions in clinical theory, practice and teaching. (American Psychological Association, Committee on Training in Clinical Psychology, 1949, 339C 340; Doctoral training programs in clinical psychology: 1949. *American Psychologist*, 4, 1949, 331C 341.)

Not much has changed in the intervening fifty years. As psychologist and APA Fellow, Robyn Dawes notes: "What the APA has failed to do - and in my mind failed miserably - is to assure that the professional practice of psychology is based on available scientific knowledge. Instead, something termed *clinical judgement* predominates as a rationale for practice; it is based on *experience* despite all the well-documented and researched flaws of making experience-based inference in the absence of a sound theoretical base. (Dawes, Robyn. *APS Observer*. January 1989, p.14.)

In many ways, *Science* has become merely a marketing term, used to imply to consumers, insurers and legislatures that the statements psychologists make are valid and the treatments they offer are effective. The mystique of science is used to sell a wide variety of products. Evidently *Science* is the Gucci label of the Psychology Industry, an empty nominal serving to enhance the image, and bolster the social power of psychologists.

**The ascendance of subjective experience - *Practice makes Perfect***

Professional opinion and experience has gained such prestige that objective data is no longer required, allowing facts to be readily ignored and easily distorted.

While some psychologists may align with Robyn Dawes and express regret that the profession has moved away from its scientific foundation, others believe that there is a greater advantage in highlighting practitioners' own values, beliefs and experience which formerly may have been obscured by bodies of theoretical knowledge and techniques. (Chapman, Jane. Politics and power in therapy: A discussion on the implications of postmodern ideas for therapeutic practices. Australian & New Zealand Journal of Family Therapy. 1993, 14(2), 57-62.) For many psychologists, the importance of the subjective, as evidenced in their claims to many years of clinical experience or to their clinical judgment, rather than to any objective proof of the effectiveness of their skills or the veracity of their opinions, is an accepted principle. Some go so far as to exalt their own personal experiences as victims over that of any professional training as qualifying them to provide treatment. Marilyn Murray, described as a specialist in the field of victim treatment, approvingly reports that at this point, many people who choose (to work with adult survivors of childhood trauma) are coming to it from their own victimization. (Marilyn Murray is cited in Beigel, Joan Kaye & Earle, Ralph H. *Successful Private Practice in the 1990s: A New Guide for the Mental Health Professional*. New York: Brunner/Mazel Inc., 1990. p.83.) Ann Jones, author of *Next Time, She'll Be Dead*, supports such a view: I speak from experience. My father was a drunk, a wife beater, and a child abuser. (Jones, Ann. *Next Time, She'll Be Dead: Battering and How to Stop It*. Boston: Beacon Press, 1994. p.1.) as does Anne Wilson Schaef, in stating: Any relationship addiction recovery process has been key in its interaction with my professional work and how I came to view my work. (Schaef, Anne Wilson. *Beyond Therapy, Beyond Science*. p.91.) and John Bradshaw who describes his approach as having its origins in his own experience. (John Bradshaw has lived everything he writes about. Jacket cover of *Home Coming: Reclaiming and Championing Your Inner Child*. New York: Bantam Books, 1990.)

But does experience, either personal or professional, enhance the effectiveness of treatment as much as it does the image of psychology? Psychologist and mental health services researcher, Leonard Bickman, identifies the belief that professional experience leads to greater knowledge and better skills as one of six myths that are routinely used to bolster (psychologists') confidence about their effectiveness. In his systematic review of the literature, he finds no evidence that clinicians get better at producing client outcomes with more experience." (Bickman, L. "Practice Makes Perfect and Other Myths about Mental Health Services." *American Psychologist*, December, 1999, p.13.)

In spite of this lack of support, psychologists persist with this myth in their campaign to persuade individuals and society of their professional knowledge and expertise. The term campaign is intentionally chosen because persuasion takes the form of an organized political enterprise as well as an activity of individual psychologists. Consider for example the APA's multi-million dollar public education campaign, *Talk to Someone Who Can Help*, the goals of which are to help people understand ... how a psychologist can help with everyday life problems. (APA Office of Public Affairs, 1999.) The purpose is to market the image of psychologists as helpful and powerful. And the success of the campaign rests on psychologists presenting themselves as an authoritative professional group possessing specialized and powerful skills - all wrapped in an aura of science.

### **The symbols of professionalism**

Since professional boards have the power to

grant and revoke the licences of practitioners, licencing and certification programs foster the public image of professional accountability and credibility. However, while these boards assert that their primary function is the protection of the public, they were actually established, and they continue to function, as vehicles for protecting their members.

The prominent psychologist, Rollo May, shortly before his death, recounted the events leading up to the licensing of psychologists in the United States. (May, Rollo. *Foreward. In History of Psychotherapy: A Century of Change*. Feedheim, Donald K. (ed.) Washington, D.C.: American Psychological Association, 1992.) He described the mid 1950's as "the dangerous years," when a conservative wing of the American Psychiatric Association wanted to have psychotherapy declared a restricted medical procedure. These physicians and psychiatrists threatened to outlaw all non-medical psychotherapists and, for several years, these psychotherapists lived in fear that physicians would put them out of business by taking ownership and control of psychotherapy. Finally, a conference was organized on training, practice and safeguards, out of which rose the impetus for licensing of psychologists. From then on, as various state and provincial legislatures enacted licensing laws, it became accepted that psychologists had the skills and the right to do psychotherapy. Psychologists had succeeded in extending the dreaded therapeutic monopoly to include themselves. Ironically, they came to adore the power which they had abhorred earlier when it was held beyond their reach in the hands of medicine.

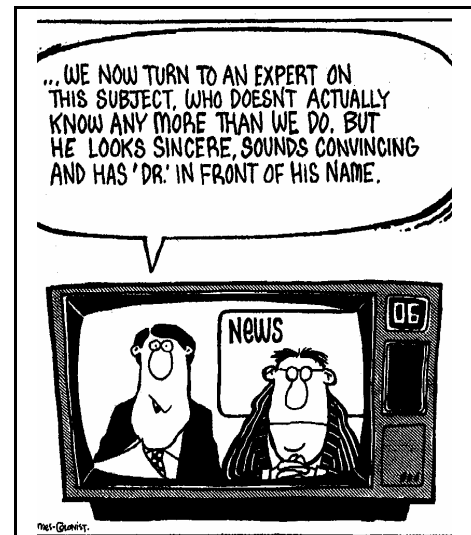
Rollo May went on to describe a conversation he had at that time with Carl Rogers; "expecting his (Rogers') enthusiastic help, I was taken aback by his stating the he was not sure whether it would be good or not to have psychologists licensed... During the following years, I kept thinking of Carl Rogers' doubts about our campaign for licensing. I think he foresaw that we psychologists could be as rigid as any other group, and this certainly has been demonstrated...@

While accusations of unaccountability and cover-up are difficult to prove since most of the activities of these licensing boards are conducted in camera, several provincial boards have gained unwanted attention in recent years for the misuse of their power.

The College of Alberta Psychologists (CAP) has been under fire for some time. In 1994, three fathers complained that three psychologists had falsely suggested child sexual abuse activities which resulted in the men losing their children. The professional body closed the hearings to the public and the complainants and promptly cleared the three members of any wrongdoing despite conflicting testimonies from the social workers in each case. The President of CAP from 1996 to 1999, Louis Pagliaro, believes that the Board failed to hold its members accountable and poses a threat to the public. This view is shared by Paul Sussman, who chaired CAP's internal audit committee during the same time period: "To this day I remain disgusted with what I saw." (Carmen Wittmeier, An organized gang. *Alberta Report*, July 26, 1999. p.42.)

In recent years a number of provincial and state boards across North America have been criticized for their failure to act on complaints.

In British Columbia, for example, a complaint was lodged against a prominent psychologist who had recommended that sole custody of two young children be awarded to their



mother because she was the weaker parent. In divorce court, this bizarre logic was taken seriously; the mother received sole custody and the father, who was granted only access, was instructed by the judge to deal with the situation. The complaint from the father was heard by the College of Psychologists of British Columbia in private and dismissed. Subsequently, the Board refused to provide the transcript of the proceedings to the father on the grounds that it might expose (the psychologist) to civil litigation. (Personal communication and correspondence 1998-1999.)

In Ontario, a man was deprived of virtually all contact with his children for seven years because of the influence of a psychologist's report in which inaccurate information was taken as factual. The psychologist had stated that the father had been involved in an extramarital affair when actually it was his wife who had left him for another man. As well, the psychologist had portrayed him as physically abusive to both his wife and his children, without having bothered to check with the only source of that information: a counsellor who, having once claimed that the father had admitted to physical abuse, had later denied that he had ever said so. But the psychologist's report led the judge to view the father as a confessed abuser and to sever access to the children. The College of Psychologists of Ontario conceded that errors had been committed but in a trivializing manner did nothing more than caution the psychologists who had written the report to check out second hand information in the future. (Donna La Framboise. Custody assessors decide children's fates, but who has control of them? National Post, January 30, 1999. pp. A1 & B6.)

Across North America many similar complaints are lodged annually with comparable outcomes. Apparently, bizarre logic, idiosyncratic theories, and the inclusion of inaccurate information does not warrant serious disciplinary action.

A report released by the College of Psychologists of Ontario (Investigations and Resolutions: A Report from the Complaints Committee of the College in *The Bulletin*, Vol.26, #1, The College of Psychologists of Ontario, December, 1999.) indicated that between June 1, 1997 and May 31, 1998 not a single case involving complaints about custody or corrections assessments or issues such as failure to obtain informed consent was referred to discipline. The sole exception was boundary violations, for which a zero-tolerance policy has been in place for all cases of sexual contact between a member and a client in Ontario and in several other jurisdictions for a number of years. All complaints involving this issue were referred to discipline.

Since such cases constitute less than 10% of complaints, the severe penalties imposed could be viewed as a token gesture, serving to give the appearance that the disciplinary committees are at work protecting the public. However, failures such as those described above have led some people both within and outside the profession to refer to the licensing boards and professional associations as "organized gangs," "closed shops," and "old boys (and old girls) clubs." They have the power but they wield it to their own advantage too often acting in ways that are for the good of the psychologist and the profession's public image rather than the good of the client or the child, or the public.

The role of licensing in affecting client outcome and therapy effectiveness is to date mythical according to Bickman. (Bickman, L. Practice Makes Perfect and Other Myths about Mental Health Services. *American Psychologist*, December, 1999.) Unfortunately, as mythical and meaningless as they may be, the average mental health consumer sees these licenses and certificates as totems of real professional power - as proof of the ability to understand, to help and to heal.

With a growing awareness of the potential harm of unproven assessments, therapies and theories, some individuals have taken action to address the problems as a consumer protection issue. During the 1990's, a significant number of US psychologists were successfully sued in civil courts and forced to pay large sums of money in damages. (Eisner, Donald. *The Death of*

*Psychotherapy: From Freud to Alien Abductions*. Westport, Conn.: Praeger Publishers, 2000.) A letter signed by an esteemed group of concerned psychologists was sent to the US Congress in 1995 warning that these widespread, harmful practices waste millions of taxpayer's hard-earned dollars, violate the civil rights of patients and families and defile the American judicial process and requesting open hearings into these important scientific, legal, consumer protection and public policy issues. (Now called The Barden Letter, this document, sent on January 5, 1995, was addressed to the Chairman of the Judiciary Committee, United States House of Representatives, Washington, D.C.)

Shortly after that letter was sent, legislation based on The Truth and Responsibility in Mental Health Practices Act began to be introduced in several states. ( In 1996 Indiana became the first state to pass the informed consent part of the legislation; on December 3, 1999, the Arizona Legislature began to hear testimony regarding introduction of a Bill which would enforce accountability more broadly, addressing the areas of clinical and court assessments and expert witness testimony, as well as psychotherapy.)

### **Controlling what the public is told**

While Francis Bacon promoted his empirical philosophy with the statement that knowledge is power, it was not until four centuries later that the Canadian communications guru and University of Toronto professor, Marshall McLuhan, showed us that information is power, demonstrating that those who have the information have the power! And the corollary of this is that those who have the power can decide what information is to be shared and what information is to be concealed. What they choose to tell the public becomes what we know and their message is what we believe to be the truth.

The Psychology Industry, like any business enterprise, decides what it does and doesn't want the public to know. It wants people to hear about new treatments and their successes; it wants the public to believe that psychologists are trustworthy and powerful. But it doesn't tell us when therapies are shown to be ineffective or even when they are known to cause serious harm, such as the notorious repressed/recovered memory therapy, once described by APA past-president Ronald Fox as "the black eye of psychology." (Attributed to APA past-president, Ronald Fox in "Fox identifies top threats to professional psychology" by Sara Martin, *The APA Monitor*, March, 1995. p.44.). It never issues warnings when untested theories are heralded as scientific discoveries. Nor does it alert the Justice System when expert opinions expressed in courtrooms are known to be in error.

A case in point involves a consumer survey conducted by *Consumer Reports*, the organization that reports on how well people like their toasters and their VCRs. In the annual survey for 1994, it asked its subscribers for their opinions about automobiles and psychotherapy. The response rate was an abysmal 1.6 % but, none the less, *Consumer Reports (CR)* (Mental health: Does therapy help?" *Consumer Reports*, November, 1995. Pp.734-739.) and the APA (Seligman, Martin E. P. "The effectiveness of psychotherapy: The *Consumer Reports* study." *American Psychologist*. 1995, 50(12), 965-974.) claimed that their groundbreaking survey shows that psychotherapy usually works, that nine out of ten people got better with therapy and that longer psychotherapy was associated with better outcomes - more was better. Despite an abundance of shockingly obvious flaws in the survey which should make any conclusion dubious, the *American Psychologist*, the flagship journal of the APA, described the result as a message of hope for other people dealing with emotional problems. And the APA continues to make use of it in their Public Education Program, a multi-million dollar effort designed to persuade the public that



psychotherapy works! (Farberman, Rhea K. "Public campaign nears roll-out: Public Communications Report." *The APA Monitor*, January 1966, p.5.)

On the other hand, The Fort Bragg Project, an \$80,000,000 project funded by the U.S. government, is not included in the APA's Public Education Program. (Bickman, Leonard. "A continuum of care: More is not always better." *American Psychologist*, 1996, 51(7), 690-698. See also: Bickman, L., Guthrie, P. R., Foster, E. M., Lambert, E. W., Summerfelt, W. T., Breda, C. S., and Heflinger, C. A. *Evaluating Managed Mental Health Services: The Fort Bragg Experiment*. New York: Plenum, 1995.) The results of this well designed and conducted study, described by the APA as a state of the art, startled researchers and shocked psychologists. In examining both the costs and clinical outcome of psychotherapy, it found that the assumption that clinical services are in any way effective might very well be erroneous and that longer term treatment results in higher costs but no demonstrable improvement in clinical outcome - more is NOT better. Leonard Bickman, the Project's senior researcher, utterly surprised by the outcome, states that clinical services...very effectively delivered... in a higher quality system of care were nonetheless ineffective. A very impressive structure was built on a very weak foundation. At these results, he concludes should raise serious doubts about some current clinical beliefs about the effectiveness of psychological services. This study, independently replicated in Stark County, Ohio with similar results, leads Bickman to state that A..there is scant evidence of (psychotherapy's) effectiveness in real-life community settings. (For references and a more detailed analysis of these two studies see: Dineen, Tana. "Psychotherapy: The Snake Oil of the 90's?" *SKEPTIC*, 1998, 8(3). 54-63.)

A recent controversy provides a further example of Psychology's efforts to be a gatekeeper of information. In July 1998, the *Psychological Bulletin*, one of the APA's premier journals, contained an article entitled "A Meta-Analytic Examination of Assumed Properties of Child Sexual Abuse Using College Samples." In it, the authors, Rind, Tromovitch and Bauserman did a critical review of the research literature on pedophilia and voiced the cautionary conclusion that, contrary to public opinion, the effects on children of "adult-child sex," (the authors' term) are not always severe. Egged on by a furious Dr. Laura Schlessinger, the talk-show host, the US House of Representatives voted unanimously on July 12 1998, to denounce the study. The APA responded with the assurance that future articles will be more carefully considered for their "public policy implications" before publication.

The purpose in mentioning the issue here is not to voice an opinion one way or the other about the conclusions of the study but rather to point out that the largest association of psychologists in the world, the APA, intends to vet future articles according to their political acceptability rather than their scientific merit. Despite the fact that this paper provided evidence to back statements regarding the resilience of children to survive life's cruelties, the profession, in "a stunning display of scientific weakness and moral posturing," moved not to encourage scholarly discussion of the topic but rather to patch the puncture in its power and repair its relationship with government, "the Christian Coalition, Republican congressmen, panicked citizens, radio talk-show hosts and a consortium of clinicians." (Tavris, Carol. "The politics of sex abuse." *Los Angeles Times*, 7/19/99.)

These examples offer a mere sampling of the many instances where the public will not be told the whole store, where an advertising campaign is presented as if it were serving an educational function, and where censorship is applied in such a way that information is shaped to fit not the criteria of science but rather the definition of political propaganda.

**Relying on Fear appeal to promote its services**

In declaring that "the only thing we have to fear is fear itself," U.S. President Roosevelt acknowledged the power that fear can have in influencing behaviour. (Franklin Delano Roosevelt, First Inaugural Address, March 4, 1933.) Not only does fear have a deterrent effect, it can also motivate people into alternative ways of behaving.

*Fear appeal* is defined in marketing terms as "advertising purporting to develop anxiety within the consumer based on fear that can be overcome by purchasing a particular item or service." (Rosenberg, Jerry M. *The Dictionary of Marketing and Advertising*. New York: John Wiley and Sons, 1995, 2 - 3.) House insurance, for example, is sold by identifying the risk of fire or theft and emphasizing how these devastating consequences can be avoided through the purchase of insurance.

To a large extent, the Psychology Industry relies on this emotional form of promotion in its ominous descriptions of the negative effects of traumatic events and how psychological services can help to avoid or overcome problems. Whether it's a tragic loss, depression, violence, stress, abuse or a hate crime, harmful effects are predicted, sometimes graphically and other times through more subtle suggestion and imagery.

For example, one Canadian national newspaper on a typical day, carried two articles advising readers of potential psychological danger. One, entitled "Job uncertainty unleashes health threats," (*National Post*, August 28, 1999, p.C2.) cites psychologists warning that "despair, anger, fear, anxiety, fatigue, depression" are common responses to stress and can "exact a heavy physical and emotional toll, causing increased heart rate and blood pressure, tense muscles, rapid breathing, increased cholesterol and a weakened immune system." A few pages earlier, an article on the anniversary of the Swissair Flight 111 crash spoke of the hundreds of people involved in the recovery mission who continue, one year later, to receive treatment to overcome the trauma and deal with "the unfinished business." (*National Post*, August 28, 1999, p.A4.) Both articles are graphic and emotional in their descriptions of the fearful effects of untreated problems.

Elsewhere, in the August 1999 issue of *Canadian Psychology*, it is reported that: "Psychological services are underutilized by depressed individuals" and a newspaper article informs Canadians that the most recent estimate shows that on average only 13 per cent of Canadians who can be clinically diagnosed as depressed, avail themselves of any sort of counseling. (Goodden, Herman. *Therapy's Many Barriers*. *The London Free Press*, August 11, 1999, A11.) When this is coupled with the concurrent statement by the Canadian Mental Health Association that 15% of people with untreated depression, or 13.5% of all depressed individuals, commit suicide, the result is another case of fear appeal advertising of psychological services. (Information provided by CMHA/Peel Branch, August 1999.)

And regarding "abuse," a popular fear-generating topic, a July 1997 Canadian newspaper headline read: "Abuse rate worse than thought, survey finds." The media reported that 31.2% of males and 21.8% of females reported physical abuse "during their lifetime. It concluded that "childhood maltreatment among Ontario residents is common." (MacMillan, Harriet L., Fleming, Jan E., Trocmé, Nico, Boyle, Michael H., Wong, Maria, Racine, Yvonne A., Beardslee, William R. and Offord, Richard. "Prevalence of child physical and sexual abuse in the community." *JAMA*. July 9, 1997. pp. 131 - 135.)

But wait! If this conclusion were to be generally applied, it would mean that almost one in every three Canadians has been a victim of physical abuse in childhood. These findings would make Canada a violent society. This was a large, publicly funded study but, as in most instances of this type of dramatic statistical reporting, no data is available for scrutiny. Although repeatedly requested, no answers were forthcoming from the researchers to basic questions. For

instance, one questionnaire item which was assumed to indicate previous physical abuse, asked respondents if they could remember, during their years of growing up, being "sometimes pushed, grabbed or shoved." While being pushed down a flight of stairs would warrant the term "abuse," it is doubtful that every instance of pushing or grabbing a child can be called abusive. And without such differentiation and details, it becomes impossible to know what the results, as reported in the media, actually mean. The social effect, however, is to spread fear and interpersonal tension throughout society, to expand funding in the areas of violence research and education, and to increase professional staffing; all to the eventual benefit of those psychologists who are "in the business."

The oft-referenced study sponsored by *Ms. Magazine* provides one further example of how the meanings of terms can be blurred to inflate numbers and generate fear appeal advertising. The *Ms. Magazine* study states that 25% of women have been raped by the time they are in college. This figure was based on a question which did not ask women if they had been raped but rather whether they had ever "given in to sexual intercourse when (they) didn't want to because (they) were overwhelmed by a man's continual arguments and pressure." This might be significant information except for the fact that 73% of the women who were categorized as rape victims did not consider their own experience as "rape." Rather, it was the psychologist conducting the study who redefined their experiences as rape stating that the women themselves didn't recognize what had really happened to them - they were victims but didn't know it. (Koss, Mary, Gidycz, Christine A., and Wisniewski, Nadine. "The Scope of Rape: Incidence and Prevalence of Sexual Aggression and Victimization in a National Sample of Higher Education Students." *Journal of Consulting and Clinical Psychology*, 55(2), 1987, 162-70.)

One can only conclude that these fear-promoting, pseudo-scientific surveys are designed with political and self-serving, rather than scientific, intentions. Survey results are not necessarily scientific and should not be trusted just because they appear in journals, cite statistics, receive government support or generate media headlines. The Psychology Industry is very effective in massaging definitions and misusing numbers for the purpose of engendering the fears which are useful in promoting its services.

The data essential for evaluating the accuracy of the conclusions of surveys and studies are too often left unexamined. The data is rarely requested and when it is requested it is often not provided. In the Canadian child abuse study mentioned above, the researcher would not answer questions, claiming only that she was planning to use the data for further publications. When the Consumer's Union was asked for the data backing their *Consumer Reports* survey conclusions about the effectiveness of psychotherapy, the request was denied on the grounds that the data were proprietary. On other occasions when data is released for re-analysis, clear evidence of the abuse of numbers, or of what John Fekete has called "data rape," (Fekete, John. *Moral Panic: Biopolitics Rising*. Montreal: Robert Davies Publ., 1994.) is far too frequently uncovered.

Such questioning of the accuracy of conclusions tends, however, not to have much impact and the conclusions of these surveys and studies continue to kindle the fears which encourage consumers to purchase the research, educational, preventive and therapeutic services which are offered for sale. SUICIDE, ABUSE, MALE VIOLENCE: these words are powerful for, as Dawes notes, "words can be and have been used to rouse intuitions and influence policies in ways that have absolutely nothing to do with reality." (Dawes, Robyn. (1999) "Irrationality: Theory and practice." Unpublished manuscript.) Their power exists in part from a tendency, identified by the philosopher Spinoza, to believe that whatever one hears expressed verbally is true and only later, if ever, to question exactly what it means. Without this questioning, these verbal images,

especially when augmented by numbers, create the fears which translate into profit and power for the Psychology Industry.

### **Promoting genderism in such a way as to trap women in victim roles**

It became fashionable in the late 1980's and 1990's to be a victim. In describing the United States as "a nation of victims," Charles Sykes writes that a "don't-blame-me permissiveness is applied only to the self, not to others; it is compatible with an ideological puritanism that is notable for its shrill demands of psychological, political and linguistic correctness." (Sykes, Charles. *A Nation of Victims*. New York: St. Martin's Press, 1992.) Peter Novick coined the term "the Victimization Olympics" in referring to the competition between the various groups and individuals who seek recognition as such victims. (Novick, Peter. (1999) *The Holocaust in American Life*. Houghton-Mifflin.)

Merely to be recognized as a victim was not rewarding until society began to bestow power on all who claimed victim status, going so far even as to describe the recovery process itself as "empowering."

While I readily acknowledge that there are many authentic victims who have suffered degradation, brutality and violence, I also know that many of the people now referred to as "victims" are not authentic. Some are "counterfeit victims" who manipulate the system, intentionally lying with motives of revenge, greed or excuse-finding. Others are "synthetic victims" - people who have been taught to think of themselves as victims and to make accusations and claims based on the psychological re-interpretation of events in their lives. As the Scottish trauma expert, Yvonne McEwen, notes "the victim-makers in today's world are inevitably the lawyers, doctors, psychologists, therapists, social workers and the radical left of the feminist movement." ("Counseling 'does more harm than good'." by David Fletcher, Health Correspondent, *The Daily Telegraph*, London, UK, September 27, 1997.)

By turning all of life into psychological events, then pathologizing normal feelings and behaviours, and generalizing psychological concepts so that "trauma" can refer as easily to having a fling with the boss as to being brutally raped, people are being persuaded to see themselves as victims. Rather than assuming responsibility for their own actions, they come to believe that they must be protected, nurtured and guided by those who are described as more powerful. Each and every week, newspapers carry articles describing victims of one type or another and many of these articles conclude that counseling should be provided, laws put in place, funds set aside for a healing process, or programs established to increase self-esteem, teach parenting skills, or combat violence.

The majority of the reported victims are women. Thus, it is probably no coincidence that, two out of three consumers of psychotherapy are women. It is women by and large who are being persuaded of their weakness, vulnerability, and fragility and who are being taught to see themselves as powerlessly manipulated rather than powerfully manipulating. And, contrary to the common assumption, much of this persuasion is being done by women who themselves benefit from casting their fellow women in victim roles. It is largely female therapists, lawyers and advocates who encourage women to see themselves as victims, to complain, and to seek special consideration and compensation. It is also often female "experts" who use fear appeal to persuade women that they are victims. For instance, the report prepared by the Canadian Panel on Violence Against Women, employing a "feminist lens" (which might more accurately be termed a "feminist research bias"), presented finding which made it appear that Canadian women

stand a high chance of becoming victims of violent crime. In November, 1993, media sources throughout North America carried the results:

- 98% of Canadian women have personally experienced sexual violation,
- 51% of women (16 and over) have been the victims of rape or attempted rape, and
- 40% of women reported crime at least one experience of rape. (*Changing the Landscape: Ending Violence - Achieving Equality, Final Report of the Canadian Panel on Violence Against Women*, Statistics Canada, November 1993. Women's Safety Project first appeared as Appendix A of *Changing The Landscape*.)

The Canadian national news carried the shocking headline: "Two out of three Canadian women have been sexually assaulted." Could this be true?

Again, the answer lies in careful examination of the data and how they were gathered. While expressing national incidence rates, the results were based on interviews with only 420 women in one city, Toronto. The women interviewed were clearly not representative of Canadian women in general. Those over 64 years-of-age were excluded. And 46.5 % of the group had a university degree when only 7.8 % of Canadian women are university graduates.

The sampling suggests that this survey was designed with political rather than scientific intentions, as does the data that was assembled. Neil Gilbert refers to this type of data as "advocacy numbers," intended, as he says, "to persuade the public that a problem is vastly larger than commonly recognized. Advocacy numbers are derived not through outright deceit but through a more subtle process of distortion. Under the veil of social science, rigorous research methods are employed to measure a problem defined so broadly that it forms a vessel into which almost any human difficulty can be poured." (Gilbert, Neil. "The phantom epidemic of sexual assault." *The Public Interest*, 1991, 103, p.63.)

Again, "fear" and "violence" become the broadly defined catchwords of the report. In this case, the study claimed that a disturbing 56.7%, of women experienced "difficulty sleeping due to fear." However, the specific question asked was whether there was "ever a time in your life when you had trouble sleeping, or staying asleep at night, because you were nervous about or afraid for your personal safety?" This question enquires about the whole life period of the woman (including childhood) and the data shows that for 100 of the women interviewed, the fear lasted for "up to one month" (the shortest category available in the interview.) No attempt was made to discern whether any of these women experienced medical problems or other causes of sleep disturbance, which reportedly affect a significant proportion of the adult population.

While noting that 52% of women in their study attributed their decreased sense of safety to media reports of violence against women, the authors ignore recent sociological studies which suggest that it is the fear of violence rather than violence itself which is on the rise. They fail to consider the possibility that they, themselves, were harming women by creating fear and causing them to see themselves as victims.

### Concluding Comments

In a key note speech at the 1997 Annual Conference of the National Association of Provincial Court Judges, ("Judicial skepticism: Judging psychology and psychologists." The 1997 Annual Conference of the Canadian Association of Provincial Court Judges, Halifax, N.S., September 25, 1997.) I stressed two points for their consideration:

- (1) Psychology is an industry masquerading as a scientifically-based profession.

(2) No matter how strongly psychological beliefs and theories are expressed as facts, there is little-to-no certainty in the field.

Recently, two complaints were sent to the Canadian Psychological Association (CPA) - one criticizing a CPA statement supporting the review of criminal convictions based on recovered memories and the other arguing that a statement in support of the conclusions of the Violence against Women project reflected both gender bias and an abandonment of scientific principles. Both were dismissed. Normally such complaints and their dismissal would go unnoticed; however, Peter Suedfeld, President of the CPA, took it upon himself to courageously voice the following question to the membership: "When is the taking of a position on non-guild issues a legitimate function for psychological organizations?" And to answer that "it is rarely so. For CPA to get involved in this kind of advocacy, it should be necessary that as psychologists we have special knowledge - based on solid scientific data - of what the best policy would be." He encouraged members to consider "what effects (a policy statement) might have aside from allowing (psychologists) to feel virtuous, and perhaps above all, whether (they) have particular expertise that makes (their) input significant." Perhaps mindful of Hippocrates' words: "There are in fact two things, science and opinion; the former begets knowledge, the latter ignorance," Suedfeld concluded with the suggestion to his colleagues that "our contributions might be more valuable if we offered our knowledge and showed restraint in advocating our opinions." (Peter Suedfeld. "CPA and public policy." *Psynopsis*. Spring 1999. P. 2 & 4)

Regrettably, in this world of entrepreneurial psychology in which niche-making takes priority over professional restraint, it is unlikely that his admonition will be heeded. Thus, as I stressed at the judges' conference, it is important that anything said by psychologists be scrutinized carefully by judges, lawyers, the media and the public; that both the opinions and the power of this profession be challenged.

While undeniably, some individuals within the profession of psychology will face disciplinary action and even public disgrace by virtue of having seduced or been seduced by their patients or students; it must be remembered that these are only "the trees." It is my hope that public attention will not be forever diverted by pointing fingers at these individuals because this finger pointing serves to obscure our view of the bigger issue. "The forest," in this instance, is the pervasive and socially sanctioned abuse of power, in the form of the profession's influence on the media, the courts, the government, and on those with their hands on the purse strings of private and public funds.

If one remains focused on the trees, the social power of the Psychology Industry will never be effectively challenged. Some time ago, the renowned MIT professor of linguistics and philosophy, Noam Chomsky, wrote:

***One waits in vain for psychologists to state the limits of their knowledge.***

He commented recently that: "I'm sure we'll continue to 'wait in vain.' Too many careers at stake." (Private communication, April 2, 1998.) And sadly, that may be true.

I have been waiting a very long time and now I look to people outside my profession to set limits on the Psychology Industry. Society must take a look at the larger picture and ask itself whether it can afford, any longer, to remain blinded by the trees - forever distracted by the limitations placed on our understanding of the term "abuse of power."