

LETTERS

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 (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. Letters to the editor are not normally acknowledged, and space does not permit the publication of every letter received. However, see www.thepsychologist.org.uk to contribute to our discussion forum.

Where are all the scientist practitioners?

ROGER Paxton's article 'Survival of the biggest' (May 2006) raises important issues for the future of clinical research in the NHS. His vision of clinicians linking with existing local research collaborations certainly makes sense, but has implications for both the training and selection of new psychologists.

Doctoral level training in clinical psychology was introduced in the UK in 1996. At this time, many courses embraced the scientist practitioner model and despite its limitations (see for example Cook & Coyne, 2005) it remains the core philosophical approach of training in the UK. Trainees now spend longer with each core client group and there is a heavy emphasis on research methods, systematic literature reviews and critiques, culminating in the production of a doctoral level dissertation in the final year of training. Competition is ferocious and each year the postgraduate experience and qualifications of the hopeful applicants surpasses those of the previous year.

This rigorous training is designed to equip newly qualified clinical psychologists

DUNCAN PHILLIPS/REPORTDIGITAL.CO.UK

to function efficiently as scientist practitioners in the NHS, with its current focus on evidence-based practice. Given this focus, it is somewhat surprising that the impact of this rigorous training regime has yet to be formally evaluated. However, doctoral level training in clinical psychology does not appear to have resulted in prolifically publishing NHS clinicians. The vast majority of papers in the *British Journal of Clinical Psychology*

continue to come from university-based clinicians. Indeed whilst there has been a marginal increase in the inclusion of NHS clinicians in university-based studies, there appears to have been a drop in studies from clinicians who are solely based within the NHS – there was only one in 2005.

In reality there is very little opportunity for the considerable skills of modern clinical trainees to be put into practice in most NHS posts. The clinical workload and

WORRIES FOR THE NEWLY QUALIFIED

IHAVE been concerned by the increasing absence of advertised clinical psychology posts in the *Appointments Memorandum*, and by the absence of comment from the Society.

A quick scan of the June *Appointments Memorandum* shows only 41 clinical psychology posts; of these a maximum of 10 appear to be appropriate for applications from newly qualified trainees. According to the Clearing House for Postgraduate Courses in clinical psychology on the Leeds University website the number of training places in 2003 was 539.

Traditionally, trainees would await the publication of the June *Memorandum* as this is the

optimum time for applying for posts. But for this year's cohort of trainees the employment prospects seem somewhat bleak. This state of affairs appears to have been caused by the current financial issues facing the NHS. In the London area there are suggestions and rumours that posts and services are being cut, funding being either withdrawn or frozen. It may be that this is a temporary state of affairs driven by political expediency and that posts will appear again in the same numbers as before.

However, there are also suggestions from some that clinical psychologists have priced themselves out of the market. The success of the

Division of Clinical Psychology (DCP) in gaining increases in pay for psychologists has not been met with universal acclaim from other professions in the NHS. There is evidence of services looking for opportunities to create generic therapy posts employing people from other professions who have completed the necessary post-graduate training. These individuals can be employed on band 6 or 7 in the Agenda for Change structure, with no clear provision for them to be moved up to band 8. Should these issues continue they have serious implications for the place of clinical psychologists in the NHS.

If clinical psychologists are seen as being too expensive

then the current pay freeze may provide some with reasons to look elsewhere for therapy provision. If and when funding returns to its previous levels it may be that services will by then no longer see the necessity of employing clinical psychologists, having managed without them for a period of time. In this scenario it would seem to be very important for the society and the DCP to take action now to investigate the current situation and to reiterate the added value that clinical psychologists bring to services.

N. Smith
*Institute of Psychiatry
London SE5*

Editor's note: See also p.396.

associated waiting-list pressures ensure that research rapidly becomes a low priority for all but the most motivated clinicians, many of who quickly migrate back to academic posts to satisfy their inclinations. Basic audits, service evaluation and other low level, unpublished projects represent the sole research output for the majority of practising clinicians working in the NHS.

This leaves the profession in an interesting position. We are all familiar with the plight of psychology assistants who would undoubtedly make excellent clinicians; they have all of the necessary clinical skills in abundance, but may never even gain an interview, due to a solid rather than outstanding academic record (many applicants these days even have PhDs). I am not saying that academic rigour is not important for the profession. Of course it is. But all potential trainees should already be more than familiar with the scientific method of enquiry and basic research methods, having gained a good bachelors degree in psychology. I fear that as the precious training places get snapped up by the brightest and best young research brains, the ultimate reality of an NHS clinical job may mean disappointment for both newly qualified trainees and ultimately, their clients.

Sallie Baxendale

*Department of Clinical & Experimental Epilepsy
Institute of Neurology*

Reference

Cook, J.M. & Coyne, J.C. (2005). Re-envisioning the training and practice of clinical psychologists: preserving science and research orientations in the face of change. *Journal of Clinical Psychology*, 61, 1191–1196.

If you read an article in *The Psychologist* that you fundamentally disagree with, then the letters page is your first port of call: summarise your argument in under 500 words. But if you feel you have a substantial amount of conflicting evidence to cite and numerous points to make that simply cannot be contained within a letter, you can write a 'Counterpoint' article of up to 1500 words, within a month of the publication of the original article. However, it is best to contact the editor about your plans, on jonsut@bps.org.uk. We hope this format will build on the role of *The Psychologist* as a forum for discussion and debate.

Globalisation is good?

OWUSU-BEMPAH'S attack on psychology as an instrument of social control ('The 'isms' – Psychology's collective unconscious', Letters, June 2006) does a disservice to the issues he attempts to address, due to his clear anti-Western bias.

Firstly, as recent influxes from former Soviet bloc countries indicates, migratory patterns to the UK are mainly due to the opportunities that our prosperous nation affords, rather than our 'plundering and exploitation of the rest of the world' (as Owusu-Bempah claims).

Secondly, it is also wrong to equate globalisation with 'plundering and exploitation'. Globalisation is the 'integration of economic activities, via markets' driven by 'technological and policy changes – falling costs of transport and communications and greater reliance on market forces' (Wolf, 2004, p.19). For countries with the appropriate institutions in place (an important qualification) globalisation brings greater prosperity. Sadly, the grinding poverty in many African countries is not due to the exploitation of the West, but to endemic corruption (Harford, 2005).

Thirdly, countries that have attempted to overthrow the 'evils' of capitalism have produced the world's worst tyrannies, whereas market economies are associated with greater democracy and individual freedom.

Higher levels of market integration are associated with greater levels of prosociality within societies (Henrich *et al.*, 2005), because market economies require trust and reciprocity for their operation. In America, greater metropolitan prosperity is associated with more positive population attitudes towards homosexuality and

MR Owusu-Bempah's despairing comments ('The isms – Psychology's collective unconscious', June 2006) made me consider my own part of the discipline. As an occupational psychologist, Mr Owusu-Bempah might view me as a handmaiden of the dominant interests he argues psychology serves.

However, operating in the area does not necessarily mean we are all unthinking and unaware of the issues he raises in the way his letter seems to suggest. In fact, I have always been embarrassed by the largely

immigration (Florida, 2002; cited in Noland, 2004), and globally – with the exception of sub-Saharan Africa – countries with the most liberal attitudes towards homosexuality also have the most positive attitudes towards globalisation (Noland, 2004). Opposition to globalisation is largely due to people who oppose the spread of liberal values, rather than to economic concerns (Arnett, 2002).

However, in any market economy social control is also an important and necessary element, because (e.g.) laws and policing are needed to protect individual property, including intellectual property. Therefore, psychologists clearly have roles to play, both helping and advising those who fall foul of the law, but also in giving advice to the agents of the law (or serving the interests of 'dominant groups' if you prefer Owusu-Bempah's more loaded interpretation). Unfortunately, the best tools that psychologists have are not necessarily perfect tools, and so it is important that we turn a critical eye upon ourselves. However, it is important to maintain a sense of perspective, and to condemn Western psychologists as the unthinking agents of oppression is to lose all sense of perspective.

David Hardman

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References

- Arnett, J.J. (2002). The psychology of globalisation. *American Psychologist*, 57(10), 774–783.
- Harford, T. (2006). *The undercover economist*. London: Little, Brown.
- Henrich, J., Boyd, R., Bowles, S. *et al.* (2005). 'Economic man' in cross-cultural perspective: behavioural experiments in 15 small-scale societies. *Behavioural and Brain Sciences*, 28, 795–855.
- Noland, M. (2004). *Popular attitudes, globalisation, and risk*. Working paper 04-02, Institute for International Economics. Available online at www.iie.com/publications/wp/wp04-2.pdf

uncritical nature of the discipline I make my living from. As a young academic I tried to do something to rectify this. With my colleague Robin Fincham, we have for the last 20 years produced texts which included more 'critical' perspectives.

However, this critical content has meant that while they have sold well on MBAs and undergraduate business degrees, their usage on occupational psychology courses has been minimal.

Sadly, and as Mr Owusu-Bempah's 'dominant interests' argument would

Occupational professionals – managerial discourses or critical insights?

predict, there actually does appear to be an almost universal absence of any ‘critical’ perspectives on occupational psychology Masters courses. This has a number of implications. At a very basic level more exposure to critical perspectives might help MSc students understand more about what shapes the nature of work in modern market economies.

Paradoxically, this lack of any coverage of critical perspectives, for example, of professions and professionalisation, also means candidates usually have a lack of understanding of the nature of what they appear to value most – becoming Chartered. This leads to an uncritical acceptance of the importance of Chartership and essentially disconnectedness from broader economic, political and social realities.

A critical perspective of professions would see Chartering as simply a strategy for competing with other groups, which might or might not be successful. And that simply defining ourselves in this way, in our marketplace, does not necessarily entail others accepting our self-definitions – and rewarding us accordingly. Or that what in part might determine the success of this strategy is how close an occupation is to the central functions of capital.

Similarly the uncritical acceptance of competences, now at the heart of modern occupational psychology,

appears to preclude a consideration of the broader social and economic functions they serve. Little appears in the occupational psychological literature which, for example, uses or even mentions the Marxist perspective of competences – seeing their emergence as a particularly insidious form of control, reflecting the reconstitution of managerial labour in more market terms and acting as a replacement for career as the principal means of controlling managerial labour.

The absence of any critical coverage also makes reading essays from candidates (also white, largely female and middle class), as depressing as Mr Owusu-Bempah’s dealings with his doctorate clinical students appear to be. These normally consist essentially of uncritical, right-wing, managerial discourses, devoid of any real critical insights into the subjects being considered.

To remedy the faults Mr Owusu-Bempah identifies blindly serving dominant interests, I would (even as a practitioner) agree that MSc courses are not academic enough, they do not appear to provide students with the key critical frameworks (Foucault, Marx, Braverman, etc.) they need genuinely to understand the discourse of occupational psychology and be more reflexive in their working lives.

Peter S. Rhodes

OTL

167–169 Brighton Road

Worthing

Effects of violent pornography

IN their letter in the May issue, Burr *et al.* express their concern at the Society’s response to a Home Office consultation paper on internet pornography. They state: ‘We do not dispute that psychopaths may be kick-started into action by all manner of things, including pornography. But there is no evidence at all that those not already predisposed to such action will be similarly affected.’

Yet more than 20 years ago a series of experiments showed that exposure to violent pornography increases the likelihood of aggressive

responses (summarised in Donnerstein, 1984). In a meta-analysis including 30 studies, Allen *et al.* (1995) found an effect size of $r = .22$ for the impact of exposure to violent pornography on aggressive behaviour. It is important to bear in mind that these studies involved only brief exposure to violent pornography. The fact that measurable effects of such limited exposure were obtained suggests that even small effect sizes are not to be dismissed.

Furthermore, even short-time exposure to violent pornography is found to increase endorsement of rape

ON WHOSE BEHALF?

AT the end of the Society’s response to the Home Office consultation on extreme pornography referred to in the letter from Burr and colleagues in the May issue, it says that the response was prepared by Carol Ireland and Fiona Wilks-Riley on behalf of the Society. It is not at all clear what this means.

Who asked them to write it? Does it just represent their own opinions? Or did they draw together all comments made by people who had found the consultation on the BPS website and found time to respond? Did they systematically ask anyone else? Was their draft reviewed by anyone else? Who gave the authors the authority to speak ‘on behalf of the Society’? Who is entitled to speak ‘on behalf of the Society’?

John Raven

*30 Great King Street
Edinburgh*

Christina Docchar, Policy Response Unit (PSU)

Manager, replies: All responses are now handled by the PSU, which was established in spring 2005. Consultations are posted on the Society’s website and circulated to Boards and chairs of subsystems likely to be interested in the topics. The PSU then relies on the cascading of the information to the membership of those groups. Once interested parties have identified themselves to the office then the mechanism for the response can be decided – usually this involves two or more subsystems working together to produce as rounded a response as possible. The final draft is then sent to the relevant Board chair for clearance, sent on under a formal letter and logged on the Society’s website.

More information on the process can be found at: www.bps.org.uk/b6bt. The Unit is still in its infancy and any suggested improvements are more than welcome – e-mail chrdoc@bps.org.uk.

supportive attitudes (Linz, 1989). And from their analysis on the link between pornography and sexual aggression, Malamuth *et al.* (2000) concluded that there are 'reliable associations between frequent pornography use and sexually aggressive behaviours, particularly for violent pornography and/or for men at high risk for sexual aggression'.

To arrive at a balanced assessment of the risks of exposure to violent pornography, it is not helpful to ignore or

AS a member of the Society and a libertarian activist involved in the Backlash campaign formed to oppose moves to outlaw sado-masochistic pornography, I was saddened to read the letter from Michael Beattie ('Restricting the rewards for cruelty', June 2006).

Firstly, he uses the emotive 'think of the children' tactic which often indicates that the argument has no real substance. Secondly, he makes the patronising claim that those involved in S&M were often – otherwise why bother to say this? – abused as children rather than being able to accept that this is just what some people enjoy doing (rather like train spotting or morris dancing). I am sure that some were abused and some were

deny this evidence.

Barbara Krahe
*University of Potsdam
Germany*

References

- Allen, M., D'Allesio, D. & Brezgel, K. (1995). A meta-analysis summarizing the effects of pornography II. *Human Communication Research*, 22, 258–283.
- Donnerstein, E. (1984). Pornography: Its effect on violence against women. In N.M. Malamuth & E. Donnerstein (Eds.) *Pornography and sexual aggression* (pp.53-81). Orlando, FL: Academic Press.
- Linz, D. (1989). Exposure to sexually explicit materials and attitudes toward rape. *Journal of Sex Research*, 26, 50–84.

not: just like the rest of the population. Thirdly, he confuses consensual adult sexual activity including the making of pornography with the abuse of children and the production of images which are simply evidence of a crime in the same manner as CCTV footage of a mugging would be.

Although I am sufficiently worldly-wise to have a genuine knowledge of what is involved, S&M is not my personal cup of tea. However, as a libertarian I strongly support the right of people to engage in whatever consensual activities they choose and oppose those who think that they know what's best for others.

Nigel Meek
*Libertarian Alliance
58 Burnt Ash Lane
Bromley, Kent*

Humanistic psychology

IN the last issue you printed a letter from Dorothy Coombs which contained the following: 'Is psychology a "science"? If so, what will happen to the humanistic and psychodynamic approaches?'

I don't know about the psychodynamic, but the humanistic approach is totally committed to the practice of science. It does, however, have a broader definition of science

than do some others. We would include the hermeneutic approach, the phenomenological attitude, the experiential way of doing research, and so forth. As one of the pioneers of these more open and responsible ways of doing science, I would not like to abandon it at any time.

John Rowan
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BORN TO BE BRIGHT?

IN the June issue John White argued that the pioneers of intelligence testing were to varying extents influenced by Puritan views, with their emphasis on predestination. Strangely, however, he failed to mention the foremost originator, Alfred Binet, who had produced in 1905 the first version of his test. This was to be modified in 1908 and 1911 and then to be taken up enthusiastically by Burt and by Terman, each of whom had a translation made for their individual purposes.

Binet's views were completely opposed to those whom White mentioned. Thus in 1909 he noted that 'Some recent philosophers have given their moral approval to the deplorable verdict that an individual's intelligence is a fixed quantity, one which

cannot be augmented. We must protest and act against this brutal pessimism; we are going to try to demonstrate that it has no foundation whatsoever' (p.141). Binet died two years later so his anticipated programme never came to fruition. A further 25 years were to elapse before the environmentalist Iowa Group, headed by Harold Skeels, took up the challenge.

It is important for historians of psychology to be aware of both hereditarian and environmentalist origins of intelligence testing which is, of course in itself agnostic to both extremes.

Alan and Ann Clarke
*109 Meadway
Barnet*

Reference

- Binet, A. (1909). *Les idées modernes sur les enfants*. Paris: Flammarion.

Links with the West Bank

THANK you for publishing Anna Costin's interesting article 'Psychology in Gaza and the West Bank' (May 2006). I recently went to the West Bank as part of an ongoing EMDR Humanitarian Assistance Programs (HAP) project, at the invitation of East Jerusalem YMCA. As Anna Costin notes, there is a tremendous need for further training, especially at a postgraduate level, and for the development of academic and clinical links. Colleagues from Palestine, the HAP project and the UK have good clinical links, and we are currently developing academic links, including the exploration of PhD research.

In practical terms, we are in the process of translating some psychological training and clinical assessment materials

into Arabic and would welcome contributions from psychologists and others as part of this process. We would also welcome interest from people in addressing the impact of ongoing social and political situations on cognitive structuring and the implications of this for CBT and other psychological interventions.

The contributions are not one way. I learned a great deal during my time in Palestine, not only about the psychology of ongoing trauma but about the importance of learning from others and, in a joint project, enabling people to address issues of ongoing traumatic stress.

The experience gave 'community psychology' a new meaning.

Philip Dodgson
Sussex Partnership NHS Trust

A-level – Where’s the weakness?

WHILST we would agree with Richard E. Rawles (Letters, June 2006) that there are weaknesses in the foundation for further

study of psychology in the current A-level specifications, we disagree strongly with his diagnosis of what these are.

We are certain that he and his colleagues have experienced candidates who discussed predictable aspects of forensic and atypical psychology at interview, but we can assure him that this is not because of weaknesses in the specifications.

At our own centre we do not teach forensic psychology, preferring to concentrate on core areas, such as social, cognitive, biological, child development, and perspectives.

Discussion with colleagues at other centres supports this finding.

It may surprise Richard to know that a large proportion of the specification focuses on research methods, in addition to critical evaluation of a range of experimental work embedded within core areas of psychology. This ranges from recent neurophysiological studies to seminal studies in social psychology such as Milgram’s. Candidates must also design and carry out their research, as well as report it using conventional scientific format. This could be an interesting topic for discussion at interview: What did they

study? Why? What were the limitations encountered?

It is a great pity that Richard and his colleagues have been unable to access the undoubtedly broad and detailed knowledge of their candidates. We wonder how important the expectations of the interviewers are as an influence on performance. We are also confident that most candidates who have studied A-level psychology could ably discuss this with him in the context of the scientific method.

Karen Barnacle
Head of Psychology
Amanda Jones
Psychology teacher
Bablake School, Coventry

ON THE FORUM

For more discussion and debate, see www.psychforum.org.uk

Topics this month include more on the extreme pornography consultation; psychology in Gaza and the West Bank; recovered memories; statutory regulation; forensic psychology chartership; and was the June edition of *The Psychologist* strangely sexist? Visit and post now!

INFORMATION

■ I PROVIDE an outsourced occupational health contract to a major insurer in London. I have been asked by my client if any guidance has been produced specifically relating to the **psychological aspects of a possible flu pandemic**, e.g. looking after someone that may have it, or whose relatives have it. Despite contacting all the major professional bodies, thus far I can find nothing – any information gratefully received.

Jo Berriman

CIGNA HealthCare

Tel: 020 8850 9314; e-mail: jo.berriman@cigna.com

■ **TRAINEE counselling psychologist position required** starting September 2006. I am a trained counsellor with 250 client hours’ experience. I have a place on a postgraduate course starting in September and need to find a placement for my client work (no payment required). Preferred areas are: Gloucestershire, Bristol, Bath, Wiltshire, South Wales – but I will travel further (or move).

Sarah Pearson

E-mail: spearfishes@hotmail.com

■ I AM undertaking counselling psychology doctoral level research on: ‘The practice of counselling psychology in UK health care: An

interpretative phenomenological analysis.’ I am looking to **interview chartered counselling psychologists** who have had five or more years’ experience of working within the NHS. If you are interested in taking part, please contact me.

John Moran

E-mail: Johnfmoran@hotmail.com

■ **OUR** three-year-old son, Jack, has autism and epilepsy. We are looking for volunteers to help us with the ‘**Son-Rise program**’, a child-centred, home-based approach which seeks to engage and motivate the child to reach their full potential. If you have a warm, open attitude, plenty of energy and enthusiasm, and you are able to make a weekly commitment of at least four hours, please give us a call.

Dawn and Mike Cavanagh

25 Woodrush Rd, Lincoln
Tel: 01522 803583

■ I AM a chartered counselling psychologist working in the NHS and I have recently assessed a lady with profound deafness, with the aid of a RNID interpreter. I am planning to do some work with her in due course, and would be very interested to hear from any psychologist who has experience of doing **therapy with profoundly**

deaf people using a British Sign Language interpreter.

Jennie Rowden

■ WE are looking for an **honorary assistant psychologist to help support our adult primary care group work programme**, based in the

Kingston area of southwest London, two to three days a week. The programme is CBT- and mindfulness-based and covers anxiety disorders, depression, anger, and sleep. The position would involve supporting the group sessions, updating relevant literature and handouts, and some admin. We are looking for a psychology graduate who is willing to take on a minimum six-month honorary unpaid contract, with the position being ideal for those seeking clinical experience in order to go on to clinical psychology training.

Rhona Trotter

Tel: 020 8541 1686; e-mail: Rhona.Trotter@swlstg-tr.nhs.uk

■ I AM a clinical psychologist aiming to undertake an independent (non-commissioned) project examining experiences of professionals who have come into contact with **CAFCASS**, either

professionally or personally. I will also be examining (where feasible) the experiences of service users whose cases have closed. If you would be willing to take part, simply e-mail your contact details. All responses will be treated in the strictest confidence.

Carly Smith

E-mail: carlysmith2001@yahoo.co.uk

■ I WOULD like to get in touch with other **psychologists pursuing the Statement of Equivalence in Clinical Psychology** with the prospect of forming a support network (and why not potentially a relevant group within the BPS?).

Lina Papista

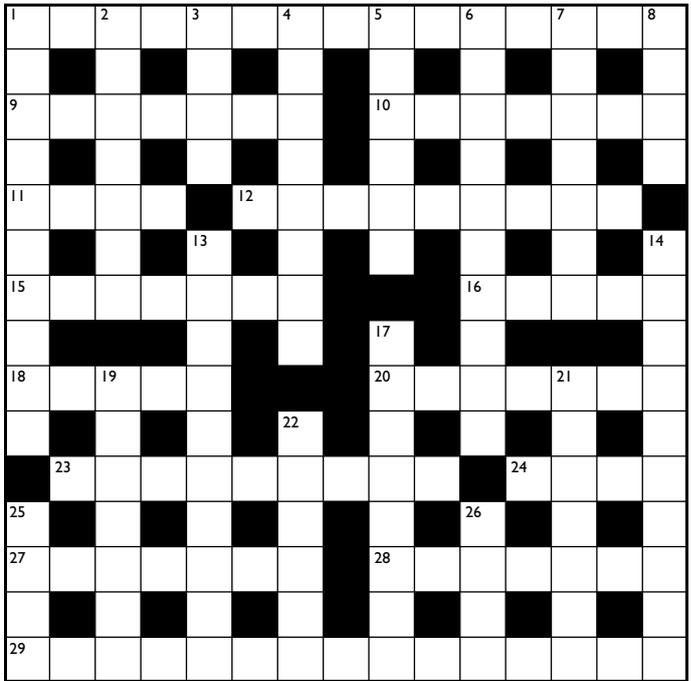
E-mail: plinaki@yahoo.gr

■ I AM a psychology graduate who also has an MSc in psychology and Mental Health. I am looking for **voluntary work or research experience in clinical psychology**, preferably in or around the Glasgow area. I have experience of working with women who have moderate mental health problems and my master’s dissertation was on minority services providers, and perceptions of self-harm in South Asian women.

Afshan Chaudary

Tel: 07725 205663; e-mail: afshan_chaudary@hotmail.com

PRIZE CROSSWORD No.28



Pushing the envelope

I AM writing to raise my concerns at the amount of mail that I receive from the various parts of the Society. I may have around six letters at a time all posted individually – some from the same sections/divisions.

Is there a way that this could be coordinated better so that it would save the cost of posting several letters to the same person individually and perhaps post them together in one or two envelopes instead? I imagine if this could be done then it could reduce costs to the Society and be more environmentally friendly.

Just a thought?
Sarah Simmonds
 Child and Adolescent Mental Health Services
 Gulson Clinic
 Coventry

Bernard Marriott, Operations Directorate Manager, replies:
 As far as possible, mailings produced by subsystems are included with The

Psychologist. However, there is a physical limit on the amount of material that can be accommodated, and the schedule for The Psychologist does not always fit in with the requirements of subsystems. As members may join up to 25 subsystems, and also be a member of their Branch (not to mention subscribing to up to 10 journals), it is not always possible to combine mailings to individuals. Direct mailings, paid for by advertisers, are sent separately. We do monitor outgoing Society mail and will continue to reduce the numbers wherever feasible.

There will shortly be scope for replacing certain mailings by e-mails direct to members. The software is currently being tested, and we hope in the next few months to be able offer members the opportunity to receive subsystem notices by e-mail. An announcement will be made in The Psychologist when this is available.

Solution to Prize Crossword No.27

Across: 1 Hypothalamus, 9 Landalet, 10 Agree, 11 Unpack, 12 Hacienda, 13 Ingest, 15 Permeate, 17 Annotate, 19 Get off, 21 Intimacy, 22 Detach, 25 Nepal, 26 Adulthood, 27 Free-floating.

Down: 1 Hallucinations, 2 Pinup, 3 Trances, 4 Ally, 5 Anteater, 6 Uranium, 7 Brentano, 8 Beware of the dog, 14 Genotype, 16 Stockade, 18 Tumbler, 20 Electra, 23 Aioli, 24 Gull.

Winner: Andrina McCormack, Dundee

Send entries (photocopies accepted) to: Prize Crossword, The Psychologist, St Andrews House, 48 Princess Road East, Leicester LE1 7DR. Deadline for entries is 14 August 2006. A £25 book token goes to the winner, drawn at random from all correct entries.

Across

- 1 John Buck's personality test makes superheroes note chaos (5-4-6)
- 9 Existentialist concept of relationships with world translation? (7)
- 10 More shabby tasteless items lead to row (7)
- 11 Some platinum blondes are unfeeling (4)
- 12 Flags principles of conduct (9)
- 15 Southern Austrian psychiatrist, it's said, I make riding tack (7)
- 16 Choose the Spanish elementary cognitive tasks initially (5)
- 18 I am to get older picture (5)
- 20 Go back about bargain (7)
- 23 Dominant female to demonstrate about art I arranged (9)
- 24 Extremely bad area beside race track? (4)
- 27 Headgear, attire bishop's primarily altered (7)
- 28 Incentives which provoke reactions (7)
- 29 John Fordyce Markey's study in emblematic system? (8,7)

Down

- 1 Homo sapiens is over spasm, as is Maslow's psychology? (10)
- 2 Strangely mute and wild (7)
- 3 Avon's paradise (4)
- 4 Spinning nonsense attributed to a Conservative (8)
- 5 Limit former shelter (6)
- 6 Runs to cover green outgoing types (10)
- 7 Stick another name for Golgi tendon organ (7)
- 8 Somewhat onerous fiddler? (4)
- 13 Going out to greet all fairly briskly in bars (10)
- 14 The worst kinds of lies may be correlational or inferential in psychology? (10)
- 17 Collapses under strain caused by drug and drink (6,2)
- 19 Eysenck's sky scene is one example (7)
- 21 Long poem you're reciting to foodie (7)
- 22 In South Africa I covered long-distance on hunting trip (6)
- 25 Bird nesting in hibiscus (4)
- 26 Low key heard to switch weight (4)

Name.....

Address.....

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