

# Creative or unequal Britain?

On the face of it 'Creative Britain' (August 2014) appeared to be the perfect antidote to Austerity Britain. Could we really be a nation united through talent and creativity?

However, from the outset something seemed strangely amiss. The front cover featured a map that included the capitals of the respective countries and Birmingham, but seemingly no creativity was to be had anywhere north of the Midlands to the central region of Scotland. Even if it was intended to be purely indicative, we have become accustomed to picture editors selecting a balanced representation out of a spirit of inclusiveness or even political correctness.

The population of the North has over the years become accustomed to, if not slightly amused by, the London-centric antics of the media. But things are changing. Weather forecasters no longer refer to the South East and the rest of Britain. Even Parliament has recently discovered the North, with the major political parties having swapped the value-for-money argument of HS2 for the idea of linking the population centres of Manchester and Leeds. Perhaps they are worried that against a backdrop of the Scottish independence debate, the county that



TIM SANDERS

gave birth to the creator of the creative Olympics ceremony (Lancashire's Danny Boyle) may seek to join forces with a resurgently proud (Tour de France) Yorkshire to demand independence.

Reading on, I searched hard for evidence of a 'phenomenon'. True enough, Team GB did well in the Olympics, but let us not forget that over a third of the medals came from those who attended private schools – less than 5 per cent

of the population. The value of creative people in moving an economy forward can be immense, but although we have had our share of inventions in the last 100 years, we have not always developed technological initiatives capable of turning that creative thinking into manageable and sustainable benefits for the population as a whole.

In seeking to understand if we are genuinely moving 'towards a creative Britain', I struggled to see what developments were to occur from the 2001 citation of creative industries. A significant proportion of the research which contributed to

## Emotional management and team sports

Is it now time for the psychology community to consider the wider negative implications of emotion management in sport? Reading Martin Turner's article ('Smarter thinking in sport', August 2014), I was saddened to hear how rational emotive behaviour therapy is gathering momentum in team sports.

The broad-brush premise upon which

emotional management is built is clearly flawed in team sports. For individual sports, such as singles tennis, the main concern is the performance of one individual against another. Therefore, the athlete who controls their emotions is likely to be at an advantage: controlling irrational 'do or die' thoughts by replacing them with rational 'it's only a game'

thoughts will be helpful to keep perspective and maintain performance. For team sports, the main concern is the performance of the team as a unit. Teams, both in sports and business, rely on the



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## Whistleblowing and psychological safety

'our understanding of the contemporary phenomenon of Creative Britain' appeared to be drawn from the more traditional base of art colleges in London, described as 'Britain's hub city within the global creative economy'. No doubt it is true that unless you are an artist famous enough to sell your bed to the Tate, you are likely to find life tough going and will seek out communities of like-minded people. The point is well made that many people are capable of defining themselves through their creative contribution under difficult employment conditions and that this may compensate for an otherwise comfortable existence. However, with the decimation of public services, the proliferation of zero-hours contracts and the ratcheting down of autonomy in many public sector jobs, this is a freedom that many people in Britain do not enjoy today.

We live in a society which is still divided along geographical and class lines. The political elite is largely privately educated and drawn from a select group of schools and careers. The attainments and life chances of a significant section of working-class boys are remarkably low. Whilst the group of countries of which Britain is composed has proved resourceful and resilient, social and occupational mobility is arguably less than what it was 40 years ago. Against such a backdrop are we really moving towards or away from a creative Britain?

**David Wood**  
Preston



motivational influence of key leaders. It is the display of passion and energy from leaders that inspires and motivates.

The England football team is a prime example of an underperforming team. How many times do we need to read about (and see) a lack of passion on the pitch and overly rational post-match interviews? This team, and many underperforming teams, lack leadership energy and passion. While the athletes may be performing well individually, the team as a whole clearly suffers from the misplaced emotional management. At 2-0 down, and with 20 minutes to go, how motivational must it be to sense one's teammates thinking, 'it's only a game'?

We need more visible leaders. If only for the good of our footballing team, can we stop coaching emotional management in sport?

**Matthew Atkinson**  
Head of Research  
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With the number of recently reported catastrophic failures in organisations due to cover-ups, employee silence and unquestioning group compliance, we need the insights from psychology more than ever to be applied to the workplace, both for individual well-being and for national prosperity.

At the moment it appears that there is a hope that openness and transparency will be supported by encouraging more whistleblowing, an issue that is the subject of the newly launched second Francis inquiry and for which we are preparing a Society response in anticipation of the call for professional contributions.

However, our research base indicates that public whistleblowing has serious negative impacts both for individuals and organisations, which suggests we need to see this tactic as a last resort rather than a focus for substantial investment.

Although we have not yet identified specific research into whistleblowing in the healthcare sector, from other sectors that are just as negatively impacted by the lack of voice, openness and transparency, the evidence of physical retaliation, dismissal actions and bullying against whistleblowers makes for very troubling reading: 22 per cent of whistleblowers report physical and violent retaliation; 75 per cent have a move to dismiss made against them; and nearly all report bullying after raising a concern.

Equally significant for the long-term viability of our large employment organisations, is the substantial research evidence that while such public disclosures may improve governance practices in the short term, over the longer term they have a serious detrimental impact on overall organisational and operational effectiveness, so further compromise well-being and national prosperity.

Given that the research also indicates that it is regularly the people who are fully on the inside and highly valued by an organisation that take this action, given our deep understanding of the social psychology of group processes, we can conceptualise whistleblowing as a form of psychological martyrdom or suicide. For those who do not speak, it is experienced as a form of treachery, which has always been the last crime to have the death penalty removed.

Psychological research and practice strongly indicates that the extent to which openness in an organisation can be built and sustained is directly linked to the degree of psychological safety in any system. Predictors of low psychological safety are deficiencies in work design, role ambiguity, compromised sense of social identity, high demands, deficiencies in leadership behaviour and evidence of tolerance for bullying. In addition, a legacy of bad practice and a history of 'organisational trauma', such as survivor syndrome after restructuring or redundancy, is predictive of low safety and working environments that are 'silent'.

The newly formed BPS Working Party on Work and Health is ensuring that the psychology research and practice that informs debates like this, so critical for well-being and prosperity, are synthesis into simple briefing documents and circulated to relevant policy makers. If you are interested in finding out more about the work of this new group or contributing research and practice evidence then please e-mail me (bpswhchair@gmail.com).

**Joanna Wilde**  
Chair, BPS Working Party on Work and Health

# Memory – sifting the evidence

The first duty of the expert is to the court: they must give objective and unbiased evidence, regardless of whether they are called by the prosecution or defence. We believe Conway, Justice and Morrison's so called 'modern view of memory' ('Beliefs about autobiographical memory', July 2014) presents a one-sided account based on an incomplete and selective review of the literature, which would not fulfill the required remit of the expert at court.

For example, they repeatedly argue that vivid and detailed memories are more likely to contain errors and that non-expert beliefs about their accuracy are therefore unfounded. In fact, the abundant research on reality monitoring, criteria-based content analysis and deception indicates that amount of detail and vividness are two criteria that distinguish truthful from untruthful accounts (see Vrij et al., 2010 for a review), and true from false memories (e.g. Loftus & Pickrell, 1995; Marche et al., 2010). Further, the article does not distinguish between experimental research, where people are prompted to remember a novel experience in the laboratory or a single childhood event, from experiences of child sexual abuse. Cases that come to court are usually characterised by memories of repeated events involving familiar locations, people and objects. Frequently, such memories will have been extensively rehearsed through the process of reminiscence, sometimes in social settings, but often alone. We know that in the absence of known contaminants, rehearsal maintains memory. In these circumstances, the

retention of a detail concerning an object (such as a much-worn article of clothing) would not be that remarkable.

As for the 'modern view of memory' for emotional events and evidence that confidently held memories can be false, Conway et al.'s reference to the Roediger et al. (2012) chapter is in danger of being misleading. The article is a review of the different ways to address the confidence-accuracy relationship. Roediger and colleagues make clear that 'as in most issues concerning remembering the correct answer is "it depends".' In fact, these authors conclude that in the absence of known contamination it is reasonable to assume confidence is a useful indicator of the reliability of an eyewitness's decision. In the same chapter, the authors also illustrate that vividness is in part determined by the retrieval environment, partly by the memory trace and partly by the interaction between the two. Conway et al. make no mention of the retrieval method and how following best practice, questioning and investigation procedures to obtain evidence can increase its reliability. In this regard, presenting a single made-up 'amalgam' example of a police interview is unwarranted.

Finally, Conway et al. rely on Morgan and Southwick's brief in-press review to support their argument that contrary to their non-expert participants' memory beliefs, emotional and distinctive

experiences (such as weddings, funerals) do not enhance memory accuracy. Morgan and Southwick's review is specific to the ability of military personnel to identify interrogators' features in high- and low-stress training situations (with more accuracy found in the low-stress situation). This is a far stretch from the kind of experiences that Conway et al.'s participants considered. We agree with Conway et al. that the relation between memory and emotion can be complex. However, in our view, this issue is not properly captured by questions in memory belief surveys.

Conway and colleagues would do well to heed Roediger's (2008) sage observation that no memory 'law' holds across all types of individuals, events and conditions.

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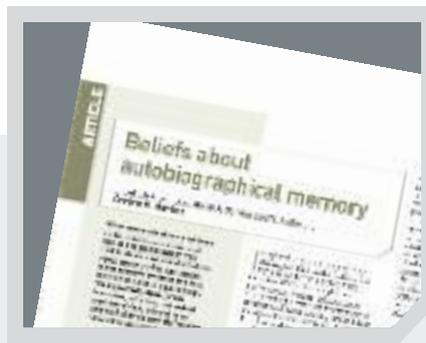
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Conway, Justice and Morrison's article 'Beliefs about autobiographical memory' (July 2014) focused upon one particular viewpoint of one particular issue, on the assumption that 'the view taken by the law is that, as all jurors have memories, by reflecting on their own memory, and perhaps that of others, they will be able to make informed "commonsense" judgements of memory evidence'.

I am not sure where this perception comes from, because experts advise the courts on memory and many other matters in a wide range of cases, civil as well as criminal. These include instances of brain injury, automatism, amnesia for offences, false confession, and fitness to plead, not just cases of child sexual abuse.

What is important to remember is that 'the modern view of memory' is, and any expert witness should be, neutral with regard to truth or accuracy in court. Defendants, as well as prosecution witnesses, make errors that sometimes may be memory errors and



distortions. Experts advise the court, sometimes with conflicting advice, but they are only a part of the legal process. Juries decide where 'truth' lies, and they may use various criteria to do this besides what they are told by psychologists, including the persuasiveness and consistency of the witnesses, the availability of any forensic and/or corroborative evidence, the lucidity of the closing speeches and the judge's directions, etc. (how juries make decisions is itself an underresearched topic).

While psychologists have an important role in advising and educating lawyers, courts and others, their role in court, like that of other expert witnesses, is to advise the court, and not to fall into the trap of becoming advocates or attempting to usurp the role of the jury. This did not seem to me to be entirely clear from Conway et al.'s account.

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In the article 'Beliefs about autobiographical memory' (July 2014) there is a box labelled 'The modern view of memory', which seems to me one of the most narrow, biased and dogmatic accounts I have seen since the publication of the Roman Catholic Catechism. Its 10 paragraphs all suffer from the same fault – they deal with just one form or type of memory, which is conscious recall.

Research on conscious recall is quite simplistic. The authors give an example of such research: 'We asked our respondents two simple questions: *Bring to mind the first memory you have. What age are you in this first memory?* and *In your view, what is the earliest age someone can have a memory from?*' Talk about simple-minded! Some people, given the right setting, can remember their birth, and life in the womb at various earlier ages. The reason this does not show up in the data is simply that the wrong research method is being used. Other methods are excluded, and indeed not even considered.

The controversies about memory in therapy might be eased if we accepted that there were four memories, not one.

- I Intellectual memory, cognitive memory, is located somehow in the brain, mostly in the cerebral cortex. The details are not yet all worked out, but nearly all of the work in memory in psychology – including the article in the July issue – has to do with this type of memory.
- I Emotional memory also has a great deal to do with the brain, but here it is mainly in the limbic system, and takes the form of images rather than words. It is difficult to reach other than by actually re-experiencing the events concerned. This also applies to memories held in the muscles, as Reich and other body therapists have discovered (see Rothschild, 2000).
- I Bodily memory is held all over the body. Again it has to be re-experienced or relived, rather than called up verbally. Graham Farrant (1986) calls it cellular memory, and has written a good deal about it. Much of the primal work in psychotherapy (Brown & Mowbray, 1994) depends upon this level of memory. David Chamberlain (1998) has given much of the evidence for birth memories being of this kind.
- I Subtle memory or soul memory is not located in the body or brain, but in the subtle body. It holds memories of previous lives and of lives lived at other levels of the transpersonal realm. It is not difficult to tap into

once one makes the effort, as Roger Woolger (1990) has argued.

In my opinion, all four types should be opened up properly in academia. If these things exist, they should be studied in all their complexity, and not left to the few therapists who have taken the trouble to write up their findings.

Many psychologists, including some of the most prestigious, deny the possibility of memories going back before the age of about three years. The reason is that they are making use of research designs that are not designed in such a way as to enable early memories to emerge. What we find in psychotherapy is that new clients very often start off with the belief that their childhood cannot be remembered but was doubtless 'happy'. As they begin, however, to build up a rapport with the therapist and a sense of trust, memories of their childhood begin to return. In other words, early memories need an atmosphere of trust and permission and acceptance before they will emerge.

One of the leading psychologists who has taken the trouble to investigate this is David Chamberlain, who died just recently. His 1996 paper is a good example of the kind of results that can

emerge from properly conducted research. Yet it seems hard for the ordinary academic researcher to admit that their empirical quantitative methods might not be suitable for all purposes. Early life is a stage of heightened emotion and vivid images. It is not the field of rational man. It cannot be reached by people in white coats asking questions from their clipboards.

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## The point of non-verbal tests

In a recent letter to *The Psychologist* (July 2014), Sidney Irvine argued that non-verbal tests do not exist and that therefore psychologists should stop looking for them. Unfortunately, he is somewhat wide of the mark. Non-verbal tests were originally called 'performance tests', and they have now existed for more than 100 years. Arthur (1946) provided a good definition: 'Performance tests might be any tests requiring overt response. In practice, they have come to mean tests which can be given without the use of language, either oral or written, or abstract symbols such as words or numbers by either the subject of the examiner' (p.447). Typically, their administration involves gestures on the part of the examiner and imitation on the part of the subject. They were originally devised to provide a fairer assessment of intelligence in people with little or no command of English, most notably in potential immigrants arriving in the United States from Europe.

Irvine's argument against non-verbal tests was based on the observation of children and adults engaging in subvocal

verbalisation when carrying out tests involving figural representations. In fact, there are better kinds of evidence to suggest that the distinction between verbal and performance tests may not be straightforward (see Richardson, 2011). First, examination of the factor structure of tests such as the Wechsler intelligence scales supports a multifactorial view of intelligence rather than a simple verbal/performance dichotomy. Second, requiring subjects to repeat irrelevant sounds aloud ('articulatory suppression') leads to poorer scores on a well-known performance test, the Cube Imitation Test, suggesting that it involves some kind of speech-based representation in memory. Third, even among immigrants who are now fluent in English, a preference for speaking, thinking, reading and writing in their first language rather than in English is associated with lower scores on the performance subtests of the Wechsler Adult Intelligence Scale.

The flaw in Irvine's argument is the assumption that a test that does not require the use of language for its administration is also a test that does not

involve the use of language in its execution. Others have made this inference (e.g. Gaw, 1925), but it is clearly invalid. Even so, nowadays most psychologists recognise that any adequate measure of intelligence must include both verbal and performance tests. Irvine should get used to the fact that non-verbal tests have been around for more than 100 years and will be with us for a good deal longer.

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Professor Irvine's letter, ('Non-verbal tests don't exist', July 2014), is very puzzling. He tells us that when completing the non-verbal Raven's Progressive Matrices test, pupils moved their lips as they tried to find the answers. Did he lip-read what they were actually saying? Had he done so, he would probably have heard, 'The first shape in the series is at the top-left, the second shape is at the top right, so the next shape must be at the bottom right'. Clearly, the pupils were using words to help them solve non-verbal problems, just as non-mathematicians use words to interpret mathematical non-verbal symbols, and non-engineers use verbal instructions to tell them how to operate mechanically and electronically constructed and controlled domestic equipment.

Over 100 years ago Spearman identified g as a general potential for learning and mastering complex tasks. Since then tests measuring g using non-

verbal test items have repeatedly provided a more valid measurement of an individual's general learning potential than tests using verbal items. In particular, they have rescued a very large number of poor readers and non-native English speakers from being written off because they, according to tests using verbal test items, lack the potential to learn and to master complex tasks.

Later on in his letter Professor Irvine refers to a correlational analysis from which emerged only, 'working-memory constructs in which verbal-items, in multilingual form, were equally prominent'. Does this mean that all tests only measure verbal reasoning and nothing else? If not, whatever does he mean?

Instead of Professor Irvine's desired moratorium, may non-verbal tests flourish to everyone's benefit.

**Joshua Fox**  
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# EMDR – origins and anomalies

Bruce Grimley's letter in the August issue of *The Psychologist* in response to my article ('EMDR – more than a therapy for PTSD', July 2014) includes a claim by Dr John Grinder that he suggested to Francine Shapiro a way to treat a rape victim and that he is therefore the originator of EMDR. According to Dr Shapiro

(personal communication), no such conversation ever took place. Further, even a cursory examination of the content demonstrates the lack of any association to EMDR therapy.

According to the post quoted by Dr Grimley, Dr Grinder allegedly told Dr Shapiro to 'put her [the rape victim] in resourceful state (anchored) and have her

systematically move her eyes through the various accessing positions typical of the major representational systems (with the exception of the kinesthetic access). I suggested that she see, hear (but not feel) the events in question - obviously the kinesthetics were to remain resourceful (the anchored state) while she processed the event.'



However, this description bears no resemblance to EMDR or to Dr Shapiro's

PTSD is the only psychological problem for which NICE recommends EMDR. Therefore to justify its extended application, which can't be bad for business, EMDR practitioners such as Robin Logie ('EMDR – more than a therapy for PTSD', July 2014) must look for early trauma or negative life experiences as 'causal factors in many psychological disorders'.

McNally (2009) warns against an ever-broadening definition of trauma, which he calls a 'conceptual bracket creep', by which ordinary stressors are deemed to be traumatic. Consequently, he points out that according to some surveys nearly everyone in the USA would count as a trauma survivor today. Even if a distal trauma can be corroborated it may not necessarily be operative in the presenting problem and focusing on it may be unnecessary and inefficient. There is also the possibility that the historical event may not have been disturbing at the time it was experienced but

because of external influence is considered to be so subsequently.

Robin Logie at least concedes that we still do not know how EMDR works. However, other anomalies deserve mention.

First, it will be recalled that the role of eye movements was discovered serendipitously whilst Francine Shapiro, its progenitor was walking in a park in May 1987. She noticed that disturbing thoughts were no longer troublesome and she related this to eye movements that had occurred concurrently (Shapiro, 1995). Curious therefore that no further reports have emerged of such unassisted recovery from disturbing thoughts whilst walking, even though the latter alone, without eye movements could constitute a form of bilateral stimulation presumed necessary for recovery.

Second, in its early days, a unique selling point of EMDR was its brevity. Spector and Huthwaite (1993) reported successful treatment

of a road traffic accident survivor with PTSD in one session of EMDR. Likewise Hassard (1993) reported successful EMDR treatment of a client with body-image problems in one session. So the question remains as to why the literature has not been replete with further accounts of such rapid successful outcomes with EMDR, especially considering the current cash-strapped state of the NHS.

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initially introduced treatment, 'eye movement desensitization' (EMD). Specifically, a 'kinesthetic access' in NLP is eyes in a 'lower right' position. So, Dr Grinder's instructions are to have the person's eyes systematically move in all directions except lower right while keeping them maintained (i.e. 'anchored') in a positive state so they 'remain resourceful' and do 'not feel the events in question'.

Compare this to Dr Shapiro's initial description of EMD in her 1989 article in the *Journal of Traumatic Stress* that reported the results of the first randomised controlled trial. In EMDR, as can be seen in the excerpt below, since the clients are repeatedly asked to include a negative self-statement and report the level of disturbance, they are not maintained in a 'resourceful state' where they did 'not feel the event in question'; the 'kinesthetic access' is clearly not avoided, as the therapist instructions include the option to guide clients in a diagonal movement from 'extreme lower right'; and no systematic movement of the eyes through the 'various accessing points' is used. Rather rapid eye movements are guided back and forth from left to right.

Subjects in the Treatment Group were instructed to visualize the traumatic scene, rehearse the negative statement (e.g., 'I am helpless'), and follow the investigator's index finger with their eyes. The investigator then caused subjects to generate a series of 10–20 voluntary, bilateral, rhythmic saccadic eye movements by moving her index finger rapidly back and forth across their line of vision. The finger was ... moved from the extreme right to the extreme left of the visual field ... The investigator's finger moved either (l) in a diagonal across the midline of the face from the subjects' extreme lower right to

extreme upper left (i.e., chin-level to contralateral brow-level) or (2) horizontally at mid-eye level from the extreme right to extreme left of the subjects' visual field. (Shapiro, 1989, p.204)

This description is clearly in line with Dr Shapiro's discovery of the effects of saccadic eye movements in 1987, of which she provided a detailed account in her first published article (Shapiro, 1989).

The tenets of NLP clearly have not defined the EMD(R) procedures. In fact, Dr Grinder's claim seems more in line with an NLP procedure called 'eye movement integration' (EMI) which has been described by those in the NLP community as quite different from EMDR therapy:

For most people the therapeutic use of eye movements is associated not with NLP but with Francine Shapiro's Eye Movement Desensitization and Reprocessing (EMDR). That method, though, favors rapid lateral movements while EMI uses much slower movements designed to connect all the eye positions. The importance of connecting all eye positions is based on the NLP theory that the various movements of the eyes access different sensory systems and, therefore, different areas of neurology. (Dawes, see [tinyurl.com/leskyrr](http://tinyurl.com/leskyrr))

Perhaps Dr Grinder was misremembering a conversation he had with the innovators of EMI. In any event, it is clear that no such conversation has any bearing on EMDR therapy.

**Robin Logie**

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## FORUM HEALTH MATTERS

So for 18 years your parents have done their best to give you a good start in life. You know about your five a day, that smoking kills, to be drink-aware, that safe sex is best and you have practised 'just saying no' to drugs in many a PSE class. And then they deliver you into the hands of your university and you are free from their nagging, preaching and probably a good dose of hypocrisy. So what happens next? And what should universities do, to not undo all that has gone before?

Paradoxical effects are the stuff of many studies and have intrigued researchers for decades. Tell a child 'Don't fall' and they are more likely to fall, 'Don't think about it' and they will think about it, and 'Don't eat sweets' and sweets become what they want. So when a child leaves home and starts their independent life, this offers the perfect opportunity to react and rebel against everything they have been taught. And some will. And many parents (those that find out) will be hurt and shocked and wonder where they have gone wrong.

Other newly liberated children will simply passively follow the behaviour of their new-found peers. Their parents may not have smoked, but standing outside a lecture theatre or sitting in a beer garden with their new found friends who do may well just be too much temptation as the desire to fit in and be liked 'now' far outweighs not getting cancer in 50 years' time.

Some will just make choices based on what is there. So much for fruit and vegetables when the campus canteen offers curry and chips, and why drink safely when happy hour and buying rounds means that having any less than six pints would just make no sense – in fact it wouldn't be fair.

Poor parents! Rebellion, peer pressure and 'it was there' are so much more powerful drivers than any vaguely remembered indoctrination of keeping safe or looking after yourself. And the immediate rewards of fitting in, being liked and instant gratification will always outweigh living longer (in the distant future) and being healthy (when you feel healthy now anyway). So parents need some help and universities could make their campuses smoke-free, sell cheap healthy food, provide free condoms and even give out free soft drinks to intersperse with the alcoholic ones.

But perhaps all is not lost. As the saying goes, 'However hard you try, you always end up like your parents'. And in the main the best predictor of a person's diet, whether or not they smoke and how much they drink is what their parents do. So university might be a time of risk-taking, rebellion and not quite managing your five a day. And it always has been. And universities could do their best to minimise the harm of this time in a young adult's life. But then when they leave and embark upon the next stage of adulthood, chances are what their parents did, rather than what they said or even what their friends did in those rebellious few years, will be what comes through in the end.

(Written as a naively optimistic parent of teenagers, not as a has-been student!)

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## The end of dyslexia?

In their article Julian Elliott and Elena Grigorenko quote from William Yule (1976) that ‘The era of applying the label “dyslexia” is rapidly drawing to a close’. It should be remembered that Yule was one of the interdisciplinary team

involved in the Isle of Wight community study (Rutter et al., 1970) and co-author of several of the chapters where the importance of evidence from community studies rather than merely from selected clinic cases was

stressed. To quote from chapter 5 by Rutter and Yule, ‘Examination of the association between different items held to be characteristic of dyslexia did not support the hypothesis of a single syndrome of specific

developmental dyslexia’ (p.74).

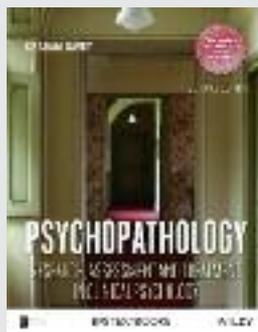
Similar evidence came from a second community study published in the same year, where in Scotland 1544 children were assessed individually at seven years of age (Clark, 1970). Those who failed were retested at eight years of age, and community incidence figures for a number of characteristics often claimed to be associated with dyslexia were assessed. Those failing in reading and of average intelligence were followed for several years. Only a few children continued to have severe difficulties, and ‘the striking finding was the diversity of disabilities and not an underlying pattern common to the group, which could have provided a basis for one single remedial method for all these children’ (p.128).

## prize crossword

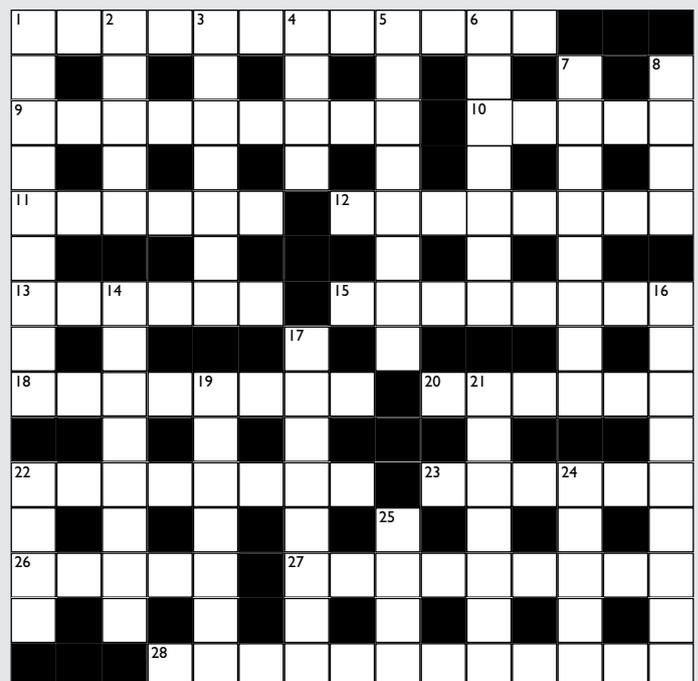
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no 77



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Send your entry (photocopies accepted) marked ‘prize crossword’, to the Leicester office (see inside front cover) **deadline 13 october 2014**. **Winner of prize crossword no 76** Migel Jayasinghe, Alicante, Spain

**no 76 solution** **Across** 1 Euphoria, 5 Tumble, 10 Classes, 11 Neglect, 12 Insistence, 13 Skit, 14 Libido, 17 Onward, 19 Sponge, 20 Esther, 23 Enow, 24 Stationery, 28 Opinion, 29 Chianti, 30 Denier, 31 Standing. **Down** 1 Euclid, 2 Peaks, 3 Obsession, 4 Issue, 6 Urge, 7 Break free, 8 Estate, 9 Anecdote, 15 Implosion, 16 Overtone, 18 Watsonian, 21 Record, 22 Typing, 25 Tacit, 26 Ennu, 27 Sine.

Do these studies remain relevant, or in the intervening years have any community studies provided contradictory evidence?

**Margaret M. Clark OBE**  
Birmingham

Julian G. Elliott and Elena L. Grigorenko ('The end of dyslexia', August 2014) argue that the dyslexia label is a cultural meme that remains unscientific and conceptually problematic.

I always tested children and adults sent to me as 'dyslexic' with [www.valerieyule.com.au/dyslexiatest.htm](http://www.valerieyule.com.au/dyslexiatest.htm), which tests the anxiety that often makes people unable to read, and took them through what I thought they needed to learn to read, and often they had

**References**

Clark, M.M. (1970). *Reading difficulties in schools*. Harmondsworth: Penguin.  
Rutter, M., Tizard, J. & Whitmore, K. (Eds.) (1970). *Education, health and behavior*. London: Longman.

missed out on some of it (see [www.valerieyule.com.au/v01ac](http://www.valerieyule.com.au/v01ac) over.htm).

There are many reasons, beside a neurological deficiency, behind an inability to read in children and adults. The fact that there are more 'dyslexics' in English than in many other languages with consistent spellings is one clue that we have more 'dyslexics' than we would have if we took the traps out of spelling.

**Dr Valerie Yule**  
Mount Waverley  
Victoria, Australia

# Publishing in journals – then and now

Reaching 80 this month, I can look back at over more than 40 years of research and writing. I am struck by how much more is being demanded from would-be authors. In the 1960s and 70s, it was normally sufficient to type the paper neatly, do one's best to create figures and tables, and then rely upon an expert editorial team to do the editing.

Now, tight rules are imposed about font, font size, line spacing, size of margins, the need for separate files for title page, acknowledgements, abstract, keywords, tables, figures, etc. There are conditions about copyright, charges for offprints, and restrictions on making one's work available freely to others. In addition, some journals charge differential fees for basic and advanced editing, insist upon charges for making the paper accessible online before the paper is published. Where are the old-fashioned proofreaders and copyeditors? Why are authors having to do so much of the basic editing?

Of course, the journals then charge fees for

institutions and individual readers to buy the journal, and no doubt there are the large fees from advertisers. Would it be easier to publish oneself, making the paper available



free? Is our need/wish to make our research known so great that we must go along with these demands? For young researchers at the beginning of their careers, for whom publication is vital, the bar is far higher than it used to be.

Robert Maxwell's entry into the academic/professional publishing world (with its substantial financial profits) has given us a legacy of onerous proportions.

**Michael Tobin**  
Worcester

## NOTICEBOARD

I have a large number of **back issues** of *The Psychologist* magazine from the last approximately nine years. If you are interested in the copies please contact me directly. I live in Cambridge.

**Lucy Markson**  
[lm473@cam.ac.uk](mailto:lm473@cam.ac.uk)

Are you a qualified psychologist willing to test your attitudes, knowledge and opinions about the 'hidden/silent addiction'? This addiction has recently been renamed and reclassified in the DSM-5 and has been reported as a public health issue and yet is not the responsibility of the Department of Health. Interested? Then please participate in this research for a Doctorate in Counselling Psychology by following this link:

[www.surveymonkey.com/s/VDHPLF7](http://www.surveymonkey.com/s/VDHPLF7)  
**Rosa Chillari**  
University of Wolverhampton

**across**

- 1 Beverages are drunk by keen types (5,7)
- 9 Dare to return captured by short tyrant and outlaw (9)
- 10 Volunteers finally abandoned book that's off limits (5)
- 11 Citrus cultivated by countryman (6)
- 12 Muse's fair sound? (8)
- 13 Venture into bunker, perhaps (6)
- 15 Decline to drink quickly and go (8)
- 18 Ran back to bed with chopped ice – that has sedative properties (8)
- 20 Beware sailors in underground hollow (6)
- 22 & 25 down Redo a vehicle restoration in position which is earned (8,4)
- 23 Somewhat immune as experiment causes discomfort (6)
- 26 Triumph for old flame last month (5)
- 27 Stucco is a puzzle to sound science (9)
- 28 Rate of increase of faster than normal educational progress (12)

**down**

- 1 Ponder varying hydrogen in body chemical (9)
- 2 Catches breath to talk over additional remark (5)
- 3 Reindeer upset, misses the north - it's more grassy! (7)
- 4 Dash point with PC connection (4)
- 5 Instrument used on hill by one breaking the law (8)
- 6 Resistance shown by Italian without a drug for ADD treatment (7)
- 7 New tube also complete (8)
- 8 25 represented wisdom (4)
- 14 No time for beginning of military operation (4,4)
- 16 One's ignored pennons or arrangement (9)
- 17 Free Latvian leader I scold (8)
- 19 Alternatively, shock treatment with intensive care starts relating to appetite (7)
- 21 Is a name recollectable with forgetfulness? (7)
- 22 Top copy given incorrect mark (4)
- 24 Skipped bail with one defence (5)
- 25 See 22 across