



LUND UNIVERSITY

Misunderstanding of hypnosis?

Cardeña, Etzel

Published in:
Monitor APA

1998

[Link to publication](#)

Citation for published version (APA):

Cardeña, E. (1998). Misunderstanding of hypnosis? *Monitor APA*, 53.

Total number of authors:

1

Creative Commons License:

Unspecified

General rights

Unless other specific re-use rights are stated the following general rights apply:

Copyright and moral rights for the publications made accessible in the public portal are retained by the authors and/or other copyright owners and it is a condition of accessing publications that users recognise and abide by the legal requirements associated with these rights.

- Users may download and print one copy of any publication from the public portal for the purpose of private study or research.
- You may not further distribute the material or use it for any profit-making activity or commercial gain
- You may freely distribute the URL identifying the publication in the public portal

Read more about Creative commons licenses: <https://creativecommons.org/licenses/>

Take down policy

If you believe that this document breaches copyright please contact us providing details, and we will remove access to the work immediately and investigate your claim.

LUND UNIVERSITY

PO Box 117
221 00 Lund
+46 46-222 00 00

LETTERS

Continued from page 3

problems, work environments, career development and interpersonal relationships. It has proven to be a perfect preparation for what I describe to my corporate clients as "management psychology"—a blend of insight and advice that builds from my training in counseling psychology. When our clinical colleagues begin to explore the world of work adjustment, they would be wise to consult the literature of Div. 14 (Industrial/Organizational).

William S. Beery, PhD
Darien, Conn

Dangerous v. healthy self-esteem

IN THE JULY ISSUE, DR. SELIGMAN called attention to America's violence crisis, and he is commended for this. However, he suggested building self-esteem is linked to violence and a disregard for responsibility and achievement. When in fact, "high" self-esteem (e.g., Rosenberg, 1979) indicates a person feels neither worse nor better than others. The accurate interpretation of valid "high" scores is "healthy" self-esteem. Healthy self-esteem, which is earned, is different than dangerous self-esteem, which is falsely inflated. The Baumlester et

al. (1996) article that linked teens' violent gang behavior with high self-esteem is often misinterpreted. Offenders' "high" self-esteem was actually clinical narcissism or unstable and inflated self-esteem.

Predicting violence is very complicated. It is safer to suggest that when violent offenders and school yard bullies report inflated feelings of self-worth, they are defending against fears of inadequacy. This is an important issue because psychologists are arbiters of mental health. When our culture becomes confused enough to resist and "blame" healthy self-esteem movements in the schools, then a cornerstone of mental health is compromised. Empathy and love for others develops with empathy and love for self—likely antidotes to violence.

The apparent backlash against self-esteem is ironic: Society is more at risk when children don't feel just as good as others. The rest of the "I am special" mantra that Seligman oversimplified is, "Johnny and Aisha are just as special too." Psychologists must help discriminate between pathological narcissism and healthy self-esteem. Please join us in promoting "healthy" self-esteem when communicating with the public and professionals.

Mary Polke-Lynch, PhD
John R. Lynch, PhD
Ashland, Va

More on the 'President's column'

I WAS PLEASED TO READ THE president's column in the June *Monitor*. Having just taken the clinical psychology ABPP exam, I too have been impressed with the need amongst psychologists to review "prosocial" ethical behaviors. While I consider myself to be honest and ethical in my personal and professional life, I found myself clarifying my thinking on a variety of issues in preparing for the ABPP exam. In particular, reviewing Koocher & Keith-Spiegel's 1998 edition of "Ethics in Psychology" helped me to sort out the "better path" when confronted with the "grey zones" of ethics. Perhaps the *Monitor*, along with state psychology organizations and APA divisions, could address these issues by including ongoing ethics columns in their publications/newsletters—not to present egregious violations of ethical behavior, but to provide interesting examples of ethical dilemmas, followed by responses from a variety of psychologists (preferably not all from academic settings). The "Clinical Child Psychology" newsletter periodically includes such a section, which is quite informative to read.

Mary A. Fritsch, PhD
Columbus, Ohio

Misunderstanding of hypnosis?

IT IS DIFFICULT TO RECONCILE your careful coverage of hypnosis in the May issue with the note written by B. Murray in the June "Newswire" regarding an article by Brandon et al. Because of space constraints, I just mention two glaring misstatements. First, Murray described hypnosis as one of a number of dangerous "memory-recovery techniques," and Brandon et al. quoted the work by McConkey & Sheehan (1995) to support their warning against hypnosis. What did McConkey & Sheehan actually conclude? "(M)emory distortion is neither unique nor specific to hypnosis...distortion is probable enough in the normal waking state" (p. 210, 214). This is not to say that hypnosis cannot be used incompetently or inadequately, or that false memories do not occur inside or outside of the hypnotic context, but these possibilities do not justify a general warning against the use of hypnosis. Second, Brandon et al. concluded that "There is no evidence to support the wholesale forgetting of repeated experiences of abuse, nor of single episodes of brutality or sadistic assault...." They based their conclusion on a rebuttal of three studies. In contrast, D. Brown et al. (1998) have reviewed dozens of retrospective and prospective studies on childhood or physical abuse, combat, torture, etc., that show consistently that a substantial minority of individuals forget single or repeated instances of trauma. Professor Chelt keeps a web page on legal

cases that also refute Brandon et al. Readers of the *Monitor* deserve comprehensive and balanced coverage on such an important issue.

Ezrel Cardoña, PhD
Gaithersburg, Md.

Thanks for the wake-up call

STAN LIPITZ'S COLUMN ON downsizing of clinical psychology is an excellent though sobering wake-up call. For those of us working in the trenches, his words ring very true.

Tom Bergquist, PhD
Urbana-Champaign, Ill.

Psychologists and managed care

I PROPOSE THAT ANY PSYCHOLOGIST in the salaried employ of any managed-care organization be required to provide full disclosure of that relationship when aspiring to positions of governance and practice advocacy.

Further, this proposed requirement should be part of the by-laws of APA and all state psychological organizations. The damage done to this profession by the advocates of the managed-care industry is already so extensive as to need no further assistance from psychologists who believe they can serve two masters.

A. Richard Tomonelli, PhD
Greenwich, Conn.

REQUIRING A PSYCHOLOGIST to conduct psychotherapy through managed-care standards, is like forcing Rembrandt to paint by number.

Franklin S. Holsinger, EdD
Huntingdon Valley, Pa



The leading practice management software program processes patient and insurance billing transactions, accounts receivable, statements, and tracks payments.

About Brand Software

We've been developing Practice Management software for almost 10 years now. We've seen many changes, watched the industry and technology change, but one thing has remained constant - our commitment to the customer. You can be sure that when you buy Therapist Helper you not only get the best in Practice Management, but also, the assurance of providing the best in quality customer service.

Here are just some of the things we've added in the past year:

- a new state of the art telephone system which allows for call queuing to wait for the next available representative
- expanded e-mail access to technical support
- an automated faxback service that gives you access to valuable technical and product information documents

Order The Full Working Model

For just \$15 (limited to 15 uses) you can use Therapist Helper in an actual setting. Enter real data, generate bills and reports, schedule client sessions, plus much more!

Name: _____
Address: _____
City: _____
State: _____ Zip Code: _____
Phone: _____
Fax: _____
Card: Visa MasterCard AmEx Discover
Card #: _____
Expires: _____
Signature: _____

Fax to 781-937-1252

© 1998 Therapist Helper, Inc. All rights reserved. www.therapist-helper.com

Sen. McCain thanks APA for support on tobacco issue

Sen. John McCain (R-Ariz.) recognized APA's efforts on the tobacco issue in a July 11 letter to APA Chief Executive Officer Raymond D. Fowler, PhD.

Dear Ray:

With Senate debate on any national tobacco policy ended for the near future, I would like to share a few thoughts with you on the legislation I offered. Needless to say, I was very disappointed that a minority number of Senators were able to prevent a vote on S. 1415, the National Tobacco Policy and Youth Smoking Reduction Act. The bill garnered 57 votes in favor, but 42 Senators voted to effectively block a final vote.

This vote clearly illustrates how the tobacco industry can use its vast resources to misrepresent the facts. The failure of a minority of Senators to see through the rhetoric means that, each day, another 3,000 kids will begin to smoke, 1,000 of whom will die as a result.

The bill would have provided for a major youth smoking reduction program to address the single greatest preventable cause of death and disease in America, while at the same time helping to stop one million kids a year from starting to smoke. It would have taken a giant step toward resolving the \$50 billion annual health care tax all Americans pay for smoking-related illnesses—nearly \$455 per household—and provided funding for vital health research. In addition, it would also have provided approximately \$200 billion to settle the current multitude of pending state lawsuits against the tobacco industry.

To those who say it is not the role of government to protect our children from the devastating consequences of tobacco use, I ask them to remember the principles of Abraham Lincoln, the founder of the Republican Party. We have an obligation to care for those who cannot care for themselves in our society, and that obligation certainly includes our children.

Ray, I would like to take this opportunity to thank you and the American Psychological Association for your tremendous help and support on this issue. However, let me assure you that I do not believe the battle is over. With your continued support, I am confident Congress will eventually pass meaningful legislation that will address this terrible health crisis.

Sincerely,
Sen. John McCain (R-Ariz.)
Chairman, Committee on Commerce, Science and Transportation

Shyness in our culture

IN RESPONSE TO THE "Newswire" "New book spotlights an overlooked anxiety disorder" in the June *Monitor*, I would like to object to the medicalizing of a cultural value. As an educator and psychologist, I have found no evidence that students who speak out in class do better than those who do not. In fact, it is often the more reticent students who have done the most reflection. In addition, some people who are shy or "socially phobic" as the article would term it are perfectly happy to avoid "being in front, dealing with people." It is interesting to note, too, that assertiveness, which is so highly prized by the dominant group in the United States, is seen as childish and lacking discipline in many other cultures that value social harmony and reticence (shyness). Is social phobia really only a thin disguise for cultural hegemony? The author of the article may take exception to my comments by asserting that social phobia would only be diagnosed in those whose shyness is causing them severe life adjustment problems. I would counter by noting that this is the same argument used in conversion therapy for homosexuals. As in that case, rather than examining the effects of a society which discriminates against those who don't fit in, and their subsequent internalization of that discrimination which may lead them to seek help, we view the problem as a "mental disorder." Another case of blaming the victim. Thanks, but I'd rather

Continued on page 54