

the psychologist...

More letters...

...From the March issue.

Stopping sex offending

I have been so delighted to read the correspondence in *The Psychologist* about working with sex offenders (Hossack, October 2014; Duff, *Pilgrim*, November; and MacLeod, January 2015). However, there is one inaccuracy in the correspondence that I would like to put right, and that was in MacLeod's letter:

'As I see it, the main stumbling block for unconvicted and would-be offenders seeking psychological support lies in our mandatory reporting laws. These laws bind social, medical and mental health professionals into compulsorily contacting police if they believe that a crime has been committed or is likely to be committed, superseding all confidentiality clauses.'

It is true that anyone working for the NHS or social services is under a duty to report suspected child abuse; yet this is not a legal requirement, it is something that employees agree to through their contract of employment. For those practitioners working in private practice there is no legal obligation to report. Psychologists and psychotherapists may feel that ethically they need to report, but that is a different matter, and brings some element of choice with it. This means that, here in the UK it is legally possible to provide confidential therapy to those who are at risk of offending, or re-offending. In fact there are many therapists doing just that, making their own risk assessment and then working with the client if they feel able to.

There is no law that stops someone in private practice from seeing a client they know has broken the law around sexual behaviour. The only time a counsellor or psychotherapist is legally required to breach confidentiality is if a client is making money through drug trafficking (Drug Trafficking Act 1986), you have a belief or a suspicion that they are engaged in terrorist activities (Terrorism Act 2006), if you know someone is unsafe to drive (Road Traffic Act 1988), or they are money laundering (Money Laundering Regulations 2007).

Indeed, one colleague wanted to check this, so contacted the Home Office for clarification. The reply from the Criminal Law Policy Unit stated: 'With regard to your question: If a client confides in you during the course of therapy that they had been viewing child pornography on the Internet, whether you would be obliged to disclose this to the authorities. There is no specific requirement in The Protection of Children Act 1978.'

This knowledge has enabled the organisation StopSO, the Specialist Treatment Organisation for the Prevention of Sexual Offending, to spread in the UK. StopSO is a not-for-profit organisation, that has a network of therapists who are willing and trained to work with sex offenders, and welcomes new members providing they have the appropriate therapeutic qualifications. StopSO offers training to enable those experienced therapists in private practice who feel ready to engage with this client group, a way to prepare themselves. Through StopSO psychologists and psychotherapists can also access specialist supervision where necessary.

If we can treat one person successfully then we may save many people from becoming victims. Good therapeutic

intervention for sex offenders is a child protection issue!

Juliet Grayson

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Social and material causes of distress

We welcome the recent debate between John Cromby and Vaughan Bell on whether understandings of mental illness are mired in the past (January 2015).

We agree that it's time to do away with the unhelpful assumption that psychological distress is mental illness with primarily biological causes. We feel it is important to point out, however, that at no stage did John Cromby say that biology plays no role in psychological distress, only that it is often not the primary causal influence. Vaughan Bell's response appeared as though he had taken John as denying any role for biology at all. But as long as we consider biology to be the fundamental cause of distress, antidepressant and antipsychotic medications will continue to be the go-to remedies. However, such medications frequently cause real mental and physical harm, including exacerbating rather than alleviating distress.

We also believe that overly 'psychologised' approaches can be equally unhelpful. For example, the over-prescription of cognitive behavioural therapies – a case convincingly argued by Peter McKenna and Keith Laws in a recent Maudsley Debate (tinyurl.com/kmbp3en) – as a treatment for distress again reflects the misplaced assumption that the causes of distress are to be found within the person. Just as biological explanations wrongly attribute distress to neural or hormonal imbalances, psychological explanations wrongly point to 'faulty thinking patterns' or 'maladaptive behaviours' as the source of psychological suffering.

John Cromby's argument that it's time to more adequately address the social and material causes of distress, and the structural inequalities that give rise to psychological suffering, makes perfect sense. Thus the call for a more sophisticated approach to understanding and alleviating psychological distress in the 21st century is prudent and timely.

Nick Caddick & Martin Willis

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No right to be forgotten for PhDs?

Ten years ago, I was one of several researchers targeted by a small group of cyberbullies. The main bully was convicted under the Harassment Act and the bullying stopped. I thought it was all over but have recently found that colleagues who Google me now find the old posts and without knowing the context, jump to conclusions. There's no warning that the URL was part of a campaign of harassment and that the author was convicted, so those who don't know me assume that the criticisms of my professionalism were made by a rational and well-informed individual. They've stopped asking me for my opinion, and any reputation I had as a competent and honest psychologist has been severely damaged.

I asked Google and Bing to remove the links to the posts as they fell under the European Court ruling and later guidelines; that is, they were old, defamatory, caused distress, allegations were untrue, most arguments were irrelevant (they had linked me to a trial that I was not involved in) and I was not a public figure. Google rejected my request, stating that as I was a professional and that my potential patients and clients needed to know. It was, in their view, in the public interest. I pointed out to them that I didn't have potential patients or clients as I had retired.

Bing never responded.

The UK regulator, the Information Commissioner's Office (ICO), rejected my complaint because I have a PhD, which in their estimation was a professional credential in a professional debate. Like Google, they felt that the