

Defining the Mind:
The struggle for legitimacy in psychology and psychiatry during the 1970s.
INSTRUCTORS MANUAL

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Overview of the conceptual issues at stake

In many ways, this is not a game about Psychology or Psychiatry, it is a game about the Philosophy of Science. This shouldn't really be surprising, as the history of the Psychology and Psychiatry is intimately linked to the history of the Philosophy of Science. Arguments made by Wundt, Freud, Watson, Hull Skinner and Miller all rely heavily on claims regarding what is or is not a legitimate scientific claim.¹ This issues has not disappeared from undergraduate Psychological classroom either. The APA's current guidelines for the Undergraduate Major in Psychology, published 2010, lists 10 learning outcomes for a major. The first is:

Goal 1: Knowledge Base of Psychology

Demonstrate familiarity with the major concepts, theoretical perspectives, empirical findings, and historical trends in psychology

Suggested Learning Outcomes

- 1.1. Characterize the nature of psychology as a discipline
 - a) Explain why psychology is a science.
 - b) Identify and explain the primary objectives of psychology: describing, understanding, predicting, and controlling behavior and mental processes.
 - c) Compare and contrast the assumptions and methods of psychology with those of other disciplines
 - d) Describe the contributions of psychology perspectives to interdisciplinary collaboration.

If the reader compares (b) to the definitions offered by the various historical figures in the 'Brief History of Psychology' in the gamebook, you will no doubt recognize the theoretical pluralism embodied in that statement. My main for quoting this document is, however, (a).

The question *if* psychology is a science is a question of demarcation – the classic issue in the Philosophy of Science. Answering *why* psychology is a science assumes a positive answer to the demarcation problem, and hence, a particular view in the Philosophy of Science. Thus, Wundt charged Hebart with non-scientific investigations into introspection², because they did not adequately control the environment. Watson charged that McDougall's notion of behaviors having a 'purpose' was non-scientific³, because they did not follow strict verificationism in the philosophy of science. When Hull charged that Tolman's explanations were unscientific because they positing internal entities, he did so by citing Newton (who, the critic would note, posited 'force', an invisible entity that was criticized at the time as an 'occult' power) (1935). Miller and Chomsky rejected Skinner's arguments by citing Philosophers of Science such as Patrick Suppes, who contend that the history of science shows that

1 See, e.g. Wundt (1902, pg 5-6) Freud ____, Watson (Mathematical paper), Skinner ____, Hull, (1935), Miller (citing Suppes)

2 Wundt, 1902, pg. 5-10

3 Watson 1929, pg. 25-6 “The Behaviorist finds no scientific evidence for the existence of any vitalistic principle, such, for example, as Prof. MacDougall's 'purpose... ..There are many things we cannot explain in behavior just as there are many things we cannot explain in physics and chemistry, but where objectively verifiable experimentation ends, hypothesis, and later theory, begin.”

scientists *do* posit internal entities, if they can modeled.

Textbooks: A brief review of introductory textbooks in psychology demonstrates that the current crop of answers here is not good-

Many of the issues raised in the course of the game are appropriately philosophical. While we've instructed the students to focus on the evidence, and its relationship with the claims asserted, one is often forced to notice how few of the great conflicts in the history of psychology and psychiatry are actually about the *quality* of the evidence presented. The conflicts are, most frequently, actually about whether the evidence in question can be considered 'scientific.'

Some of these issues that will make an appearance in the game are:

- Is mental illness a disorder of an individual or a society? (i.e. are the entities studied in psychology individual humans or human societies?) -Clark, Albee, Szasz
- Is medical model an appropriate model for the classification, diagnostic criteria and treatment of mental disorders? Szasz, Albee v. Spitzer
 - Related: Should mental disorders be classified in terms of their causes (etiology), or their symptoms? (psychoanalysts v. Spitzer)
- Are mental health norms defined in terms of statistical frequency of a given behavior in the population, or ideals of human behavior? (Anastasi v. Bieber)
- Is modeling / abductive reasoning a scientific method, or is science limited to explanations of observable behavior in terms of observable behavior? (cognitivists v. behaviorists)
- What are the responsibilities of scientists who study humans and human societies for social advocacy? (Chomsky, Skinner, Albee, Clark v. Tyler, Bieber)

Instructor's Manual

Liminal Preparation

While there is a great deal to prepare for this game, my experience has taught me that the largest challenge the students will face is understanding that psychology and psychiatry were not always as they are now presented. Most students come to the game believing that (a) psychology is a science and (b) psychiatry is a medical practice. Both of those claims were not settled in the public mind in 1970. In fact, most of the tension in this game revolves around the efforts to make psychiatry conform to 'the medical model' and psychology conform to the model of the natural sciences, thereby legitimizing them as worthwhile endeavors.

Psychology, on the other hand, had been suffering a crisis of legitimacy since its inception, which is why so many of their arguments are really metatheoretical arguments on the nature of science. The behaviorists believe that introducing new methodologies, like the cognitivists propose, would further weaken their claims to be a scientific discipline.

Generally speaking, our students come to psychology and psychiatry through textbooks. And as a result, they are primed to believe, unreflectively, that contemporary narrative of these disciplines is settled fact. Furthermore, these students know nothing of the rise and regularization of health insurance companies and billing procedures following the inception of Medicare and Medicaid in 1965. For them, managed care, billable hours and check-box diagnoses have always been a part of their medical experience. It was not in 1970. Since the 1970s, the psychiatrists and clinical psychologists have been under extraordinary pressure to create a system of diagnosis that will allow them to be compensated for their work under this system. Spitzer's shift from etiological psychiatry to descriptive psychiatry was a major salvo in that struggle.

It is difficult to get them to feel the pressure to legitimize psychiatry and psychology that drove much of the work in this era. But one can make progress by explicitly emphasizing the crisis of legitimacy before beginning the game.

Many of the stories of this period—especially those from the members of the Spitzer task force—recall a time of great confusion. Spitzer is often characterized as acting almost singlehandedly, ignoring the hard work that others put into the classifications they proposed. If students feel confused and overwhelmed with all of the proposals being brought forward and the changes being made, that is partially intentional.

While I believe that the removal of homosexuality was the correct decision, both morally and scientifically, that does not mean that the dissenters who point out the political bullying that went into passing the resolutions do not have a point. I want the students to come away with the sense that this period in the history of psychology and psychiatry was an all out scramble for legitimacy. Creating a sense of confusion and chaos is a necessary part of that environment.

Factions

Psychoanalysts	Cognitivists	Behaviorists	Unaffiliated
I. Bieber / C. Socarides MD J. Marmor, MD J. Spiegel, MD H. Lief, MD* R. Green, MD* R. Hopcke, MD*	G. Miller, PhD N. Chomsky, PhD D. Marr, ABD*	A. Bandura, PhD H. Harlow, PhD E. Hooker, MD ⁴	T. Szasz, MD G. Albee, PhD J. Fryer, MD K. Clark, PhD A. Anastasi, PhD L. Tyler, PhD R. Spitzer, MD P. Gebhard, PhD (Anthro) F. Kameny / B. Gittings (Activists)* D. Fordney-Settlage, MD* J. Piaget, PhD* R. Gold (Journalist)* S. Milgram, PhD* P. Zimbardo, PhD*

Table 1: Initial Factional Affiliations

*Not included in a class of 16.

Secret & Informal Factions:

GayPA (secret)	Young Turks (secret)	Sexual Research (informal)
J. Fryer, MD E. Hooker, PhD R. Gold* R. Hopcke, MD*	J. Spiegel, MD J. Marmor, MD	H. Lief, MD* R. Green, MD* D. Fordney-Settlage, MD*

Major Events

Declassification

The declassification of homosexuality is assured. The only characters who argue against it are Bieber and Socarides. The NY Times obituary of Socarides quotes Gilbert Herdt of National Sexuality Resource Center in San Francisco as saying “Socarides outlived his time.” That is roughly correct. While it may not have occurred to many psychiatrists in 1971 that the classification of homosexuality was a problem for the homosexual community, once it was pointed out, the opinion swung: 58% of the population approved in 1973, and there is great embarrassment about that era today.

As such, the main debate here is about the procedure by which homosexuality will be removed. Green and Marmor will be tempted to just ram it through the board of directors without consulting the population. That should be avoided. I've set up the game so that Marmor's original proposal should be

⁴ Hooker does not explicitly defend behaviorism in writing like Harlow and Bandura, but she was trained by Yerkes and Mezingier, and hence I believe it an acceptable extension of history to assign her to the 'faction'.

remanded to the nomenclature committee, which will report in 1972, requiring a final vote of the membership in 1973. While the result is not in doubt, without that process, Socarides' rhetoric that the decision was political, not scientific, will be bolstered.

DSM-III

The issue in the DSM-III is not the actual categories, but whether the categories should be based on the etiology or the observable symptoms. At the same time, the Spitzer taskforce should propose a covering definition of 'mental illness' that will directly challenge the views of Szasz and Albee. It should fail (it did, in reality).

Victory Objectives – Definition

The

Proposal	Those 'normally' affiliated
APA Task Force	Spitzer, Gebhard,, Leif, Green
Psychoanalytic	Bieber / Socarides, Marmor, Speigel, Hopcke
Behaviorist	Bandura, Harlow, Hooker
Szasz	Szasz

If the game master chooses, he or she may introduce or encourage the development of a compromise position like the DSM-IV:

... although this manual provides a classification of mental disorders, it must be admitted that no definition adequately specifies precise boundaries for the concept of 'mental disorder.' The concept of mental disorder, like many other concepts in medicine and science, lacks a consistent operational definition that covers all situations. All medical conditions are defined on various levels of abstraction--for example, structural pathology (e.g., ulcerative colitis), symptom presentation (e.g., migraine), deviance from a physiological norm (e.g., hypertension), and etiology (e.g., pneumococcal pneumonia). Mental disorders have also been defined by a variety of concepts (e.g., distress, dyscontrol, disadvantage, disability, inflexibility, irrationality, syndromal pattern, etiology, and statistical deviation). Each is a useful indicator for a mental disorder, but none is equivalent to the concept, and different situations call for different definitions."

With something like the 7 part definition included there in:

Features

- A a clinically significant behavioral or psychological syndrome or pattern that occurs in an individual

- B is associated with present distress (e.g., a painful symptom) or disability (i.e., impairment in one or more important areas of functioning) or with a significantly increased risk of suffering death, pain, disability, or an important loss of freedom
- C must not be merely an expected and culturally sanctioned response to a particular event, for example, the death of a loved one
- D a manifestation of a behavioral, psychological, or biological dysfunction in the individual
- E neither deviant behavior (e.g., political, religious, or sexual) nor conflicts that are primarily between the individual and society are mental disorders unless the deviance or conflict is a symptom of a dysfunction in the individual

Other Considerations

- F no definition adequately specifies precise boundaries for the concept of “mental disorder”
- G the concept of mental disorder (like many other concepts in medicine and science) lacks a consistent operational definition that covers all situations

Fission

Members of the factions have the option to form splinter associations: the behaviorists found the “Society for the Experimental Analysis of Behavior” (actual founding 1957), and found two journals: *Journal of the Experimental Analysis of Behavior* and *Journal of Applied Behavioral Analysis*. Psychoanalysts form the American Psychoanalytic Association (actual founding in 1911, but grew rapidly in this era) and the journal *Journal of the American Psychoanalytic Association (JAPA)*, and the Cognitivists form the Cognitive Science Society (1979) and its associated journals.

No students are given direct instruction on whether the fission requires withdrawal from the APA. Some, esp. those playing Beiber and Socarides, may feel stronger about the fission than the cognitivists Miller and Chomsky. This is historically appropriate—by the mid-1980s, cognitivism generally dominated the APA. Contemporary behaviorism has adapted to resemble cognitivism in many ways, by include talk of 'motivations' and of the 'function of behavior' in their explanations.

Players

Between 16 and 26. Every character has specific assignments in writing, politics and research. The table below “Overview of assignments, by character” summaries these assignments.

Cast of 16

	Name	Faction / Views	Game Play
1	Robert Spitzer	Independent - Psychiatrist	Nomenclature committee chair in 1971, petitions for task force in 1973.
2	George Miller	Cognitivist	President in 1971, leader of cognitivists
3	Anthony Bandura	Behaviorist	Vice-president in 1971, behaviorist, but may join cognitivists
4	Harry Harlow	Behaviorist	Former Pres. of APA, leader of behaviorists, defend aversion therapy '74
5	Noam Chomsky	Cognitivist	Critic of behaviorism, founder of cognitivism, social activist. Symposium '74, debate with Piaget '75.
6	Leona Tyler	Independent - psychologist: counseling	(run for) Vice President in 1972, install the 'Leona Tyler Principle' as president '73
7	Anne Anastasi	Independent - psychologist: psychometrics	Run for VP in 1973, form the committee on women in Psych, and the committee on the Psych of Women. Neutralize the gender-biased language of the official APA calls for papers, '71
8	John P. Spiegel	Psychoanalyst	Run for VP in 1975, reliable partner of Spitzer, straight advocate for the GayPA. Propose ('71) and complete a report ('72) on homosexuality in psych & psychiat.
9	Evelyn Hooker	Behaviorist	Early studies of homosexuality (1953), the intellectual 'grandmother' of the current movement. Calming influence on the Gay-PA, and scientifically reliable source for their arguments.
10	George Albee	Independent - clinical psychologist	Medical model symposium '72, propose clinical psych health care system
11	Ken Clark	Independent - psychologist	Run for VP in 1974, expert testimony in Brown v. Board of education. Symposium '74
12	Judd Marmor	Psychoanalyst - Freudian	Propose removal of homosexuality '71, condemn Socarides JAMA paper '72
13	Thomas Szasz	Independent - psychiatrist	Critic of Psychoanalysis, and more broadly, the medicalization of psychiatry. Paper '71.

	Name	Faction / Views	Game Play
14	Irving Beiber / Charles Socarides <i>can be split</i>	Psychoanalyst – Freudian	Classical psychoanalyst, specializing in 'treatment' of homosexuality. God-father of 'reparative therapy' movement, as he is the mentor of contemporary Nicolosi (NARTH)
15	John Fryer	Independent - psychiatrist	Dr. H. Anonymous, propose rejection of aversion therapy '74
16	Paul Gebhard / H. Lief <i>can be split</i>	Independent - Anthropologist / Psychoanalyst - Jungian	Anthropologist representative on Spitzer Task Force / Jungian psychiatrist

*Table 2: Character distribution for small class (16)***Cast of 26**

To add additional characters to the game:

- add Richard Green, MD, expert in transgenderism, student of John Money, who was also on the actual Spitzer task force (Money may be added to future versions of the game).
- then Ron Gold*, Journalist, Activist. Convinces Spitzer that classification is doing more harm than good. On Symposium '73 (“Stop it, you're making me sick”)
- Split Socarides/ Bieber into two roles*
- Split Gebhard/ Lief into two roles.

And then add to this:

Robert Hopcke	Psychiatrist - Jungian	Jungian psychiatrist who updates theory to respect homosexuals. Historically inaccurate.
Jean Piaget	Psychologist – Developmental	Old man at this time. Debates Chomsky on innateness in 1975.
Dr. Fordney Settlage	Gynecologist	Member of the Spitzer Task Force, critic of androcentrism of psych. / psychiat.
Kameny / Gittings* <i>can be split</i>	'Homophile' Activists	Activists, co-founders of Mattachine Society of Washington DC.
Marr	Cognitive Scientist	Young researchers, articulates the 'levels' of explanation of cognitive science.
Milgram	Psychologist	Presents 'obedience' study, proposes 'small world' study.
Zimbardo	Psychologist	Proposes and defends the prison study

Table 3: Character distribution for a large class

* If the instructors wishes to emphasize the 'civil rights' aspect of the game, these characters can be prioritized.

Voting

I've left the issue of membership in the APA, and the right to vote on many of the main issues, intentionally vague. This is to allow for some flexibility for the instructor. The issue of who can practice mental health treatment is a game issue, realized in competing proposals in 1973. As a corollary then, the issue of membership in the APA may be brought forward. This can also play out as one of the causes of the great 'fission' that may occur starting in 1975.

The characters effected are Kameny, Gittings and Gold, who are not members of the APA. If the gamemaster wants everyone to vote, he or she should make clear from the beginning that they are considered to be members of the APA with full rights to vote.

Overview of events and assignments in the game

Year Class	Presidential address	Talks (symposia and research reports)	Proposals	Research Tasks
1971 Washington DC				
A	G. Miller “Psychology as a means of promoting human welfare”	Symposium “Psychiatry: Friend or Foe to Homosexuals: A Dialogue,” (J. Fryer, E. Hooker, F. Kameny / B. Gittings*)	Proposal from J. Marmor / R. Gold to remove homosexuality from next DSM – send to nomenclature (opposed: Bieber / Socarides)	Presentation of 'Mental Rotation' task - gamemaster
B		T. Szasz “The Myth of Mental Illness” J. Marmor “Limitations of Free Association”	Proposal from C. Socarides to create task force to sexual deviation (Really 1970 to NY branch, reported in 1972, when it was rejected). Proposal from J. Spiegel & R. Green to create task force of historical study and literature review of homosexuality in psychology and psychiatry.	Research Report on 'Mental Rotation' data by Miller
1972 Dallas				
A	Bandura “Behavioral theory and models of man”	Symposium on the 'medical model' (T. Szasz, G. Albee) Report from Green & Spiegel on history of homosexuality – responses from	Proposal to recognize the contributions of Evelyn Hooker (From Gebhard)	Research committee considers Rosehan

Year Class	Presidential address	Talks (symposia and research reports)	Proposals	Research Tasks
		Bieber, Marmor		
B		Paper by Spitzer on Feighner Criteria Paper by Gebhard on the Kinsey report. Paper by Harlow "Lust, latency and love"	Proposal from nomenclature to write a new DSM according to description of symptoms, not causes (Opposed: Lief) Proposal from Hopcke to limit medical care of mentally distressed individuals in hospitals to licensed medical doctors (i.e. psychiatrists) Counter proposal from Albee to limit the role of psychiatrists to the admission of drugs	Research Report of Rosehan report by TO BE ASSIGNED
1973 Honolulu				
A	<i>Tyler – on individual differences & their importance for counseling.</i>	Bieber / Socarides report Report from Socarides (rejected) ← challenged by Gold, Spitzer, leading to GayPA meeting (actually 1973)	Proposal from Marmor condemning Socarides' JAMA paper as nonscientific and a 'monstrous attack on homosexuality.' (opposed Bieber & Socarides, also Bandura, for reasons of academic freedom & professionalism)	Research committee considers Zimbardo Consider Fordney Settlage, Spitzer
	Famous GayPA meeting of Spitzer and Gold. They supposedly draft their resolutions overnight.			
B		Symposium "A	Proposal for Leona	Research Report of

Year Class	Presidential address	Talks (symposia and research reports)	Proposals	Research Tasks
		Symposium: Should Homosexuality Be in the APA Nomenclature?" (Green, Marmor, Bieber, Gold, Socarides, Spitzer – organized by Kameny / Gittings)	Tyler Principle (opposed: Clark, Chomsky) Proposal from Gold & Spitzer to remove 'homosexuality' immediately. (Green opposed to vote, not issue) Proposal to create dissolve nomenclature committee and create "Spitzer Taskforce" (opposed: Hooker)	Haney et al. report by Zimbardo (if in game, if not, distribute the paper to the class)
1974 Philadelphia				
A	Clark – on psychology's role for social good / Anastasi – on psychometrics	Symposium on the responsibility of intellectuals – (Chomsky, Clark, Marmor?) Paper by Smilgram 'obedience' Paper by H. Lief on genetic hypothesis and diagnostic taxa.	Proposal from Anastasi to create committee on women in Psych, and the Psych of women (opposed: Szasz)	Research committee considers Milgram 'small world'
B		Spitzer task force open hearings on proposed definition of 'mental illness' (no symposium)	Proposal from Fryer deem the use of aversion therapy to treat homosexuals as 'immoral' (opposed: Harlow)	Research Report of Small World (if complete) report by Milgram (if not, postpone to 75). (If Milgram not in game, distribute)
1975 Chicago				
A	Clark / Anastasi / Spiegel – on the DSM-III controversy	Open discussion / vote of the membership on definition of mental	Proposal from Clark create affirmative action plan in psychology and	Research committee considers TO BE ASSIGNED

Year Class	Presidential address	Talks (symposia and research reports)	Proposals	Research Tasks
		illness. Zimbardo on the 1968 code of ethics D. Fordney Settlege on the disparity between psychoanalytic theories of male and female sexuality. Hopcke on Jungianism and homosexuality	psychiatry (see proposals section) (opposed: Milgram ⁵)	
B		Marr on Levels of explanation in psychology Symposium on 'innateness' (Chomsky / Piaget)*	Proposal to revise APA ethics guidelines in wake of Zimbardo study (research committee)	Research Report of TO BE ASSIGNED report by TO BE ASSIGNED

Table 4: Overview of game events, by year

5 Milgram is the only psychologists of this era for whom I can find documentation of opposition to the affirmative action plan, although it was certainly more widespread. That documentation is, suffice it to say, sparse. It is mentioned once in Blass, T. (2009). *The Man Who Shocked The World: The Life and Legacy of Stanley Milgram* Public Affairs, p. 201.

Overview of assignments, by character

Name	Committee Work	Paper	Proposals	Research
G Albee	Nomenclature '71-'72 Board member 'B' '71-'72*	'Medical Model' – symposium '72	Parallel medical system for clinical psychology '72	
A. Anastasi	Program '71-'73	“On psychometrics” - <i>presidential</i> '74	Proposal to fix gender-specific language in guidelines (program committee '71) Women in Psych / Psych of Women '74	
A. Bandura	VP '71 (Board '71-'73)	“Behavioral theory and models of man” '72	'73 – reject Bieber	
I. Bieber / C. Socarides		Comment on Green / debate Marmor '72 Report on sexual deviation (Freudian) '73 Symposium on nomenclature '73 (both, if in game)	Propose taskforce '71, report '73 Oppose Marmor & Gold's '71 proposal to remove 302.0 from DSM-II	
N. Chomsky		“The responsibilities of Intellectuals” - symposium '74 (<i>could be paper</i>) Debate with Piaget '75	Oppose L. Tyler principle '73	
K. Clark	Research '71-'73	“psychology as a force of social change” - symposium '74 (<i>could be presidential</i>)	Oppose L. Tyler principle '73 Proposal to create affirmative action plan '75	
D. Fordney Settlage*		Paper critiquing the focus on male sexuality '75	Propose balance compromise Albee and Hopecke on psych. Practicing in hospitals, but not prescribing drugs.	Sexual experiences of younger women seeking contraceptives. '73

Name	Committee Work	Paper	Proposals	Research
J. Fryer		"I am a homosexual, and a psychiatrist." - symposium '71	Proposal to deem the use of aversion therapy as immoral '74	
P. Gebhard	Program '71-'74	Summary of the Kinsey report '72	Honor of E. Hooker '72	
R. Gold*		Symposium on nomenclature '73	Support Marmor's '71 proposal Draft proposal with Spitzer '73	
R. Green*		Report on history of homosexuality '72 (with J. Spiegel) Symposium on nomenclature '73	Taskforce on the history of homosexuality in Psych '71 (with Spiegel)	<i>APA v. 3 #45 '74-'75 (Clinic in Ugrad classroom)</i>
H. Harlow	Board '71	"Lust, latency and love" - paper '72	Defend the use of aversion therapy '74	<i>APA v. 1 #2 (Operant Conditioning)</i>
E. Hooker	Program '71-'72	"The mental health of non-patient male homosexuals" - symposium '71	Oppose dissolution of nomenclature committee.	
R. Hopcke*		Jungian approaches to homosexuality '75	Support the proposal to limit care of mental illness to MDs	
F. Kameny* / B. Gittings*		"Gay, Proud and Healthy" - symposium '71	Organize and Chair the 'big' symposium "Should 'homosexuality' be in the DSM-III?" in '73 where Green, Marmor, Bieber, Gold, Socarides, Spitzer should speak.	Propose Siegelman "Adjustment of homosexual women" 1971
H. Lief* ⁶		Paper on genetic hypothesis and diagnostic taxa '74	Oppose Spitzer's nomenclature proposal '72	
J. Marmor	Research '71-'74	"Limitations of Free Association" - paper '71 Comment on Green /	Propose 'homosexuality' be removed from category 302. '71	<i>APA v. 4 #80 '73 (Dream Analysis)</i>

6 Can be combined with P. Gebhard

Name	Committee Work	Paper	Proposals	Research
		debate Bieber '72 Symposium on nomenclature '73	Propose a condemnation of Socarides' JAMA paper. '73	
D. Marr*		'Levels' of explanation paper '75		<i>Propose APA v. 4 #43 '72 (Magic number 7)</i>
S. Milgram*	Board member 'A'*	Summary of obedience experiments / findings '74	Oppose affirmative action plan - '75	Propose 'small world' experiment '74
G. Miller	Board '71-'72	"Psychology as a means of promoting human welfare" - '71	'72 – reject Bieber	Present Mental Rotation '71 (Shepard / class data)
J. Piaget*		Debate with Chomsky '75		
L. Tyler	Research '71-'72	"Design for a hopeful psychology" - <i>president</i> '73	Leona Tyler principle '73	
J. Spiegel	Nomenclature '71-'74	Report on history of homosexuality '72 (with R. Green) <i>Presidential address</i> '75	Taskforce on the history of homosexuality in Psych '71 (with Green)	
R. Spitzer	Nomenclature '71-'76	"The Feighner Criteria" '72 Symposium on nomenclature '73 Open hearing '74 on 'mental illness'	As nomenclature committee: write DSM according to description of symptoms, not causes '72 AND proposal to disband nomenclature & form Spitzer Taskforce '73 With R. Gold, draft proposal to remove 'homosexuality' immediately in '73	Reliability of psychiatric diagnosis '73
T. Szasz		"The myth of mental illness" - paper '71 "Medical Model" - symposium '72	Oppose committee on psychology of women '73 (on grounds of reification of the term 'women')	

Name	Committee Work	Paper	Proposals	Research
P. Zimbardo*		Paper on the ethical problems of Zimbardo '73, and any holes in the APA guidelines. '75		Propose Zimbardo '73 (if character is not used, the proposal should come from the gamemaster)

Table 5: Overview of specific assignments, by character

Papers in italics are conditional. If not elected, the students should present them as papers.

Research items in italics are NOT included in the character sheet, and can be moved around by the instructor. See Activities section on p. 24.

**Not included in games smaller than 26.*

Overview of elections, by year

Year	VP	Board-at-large*	Research (replacing)	Nomenclature (replacing)	Program (replacing)
1971	1972 (Bandura)	A (Milgram)			
1972	1973	B (Albee)	(Tyler)	(Albee)	(Hooker)
1973	1974		(Clark)		(Anastasi)
1974	1975	A	(Marmor)	(Spiegel)	(Gebhard)
1975	1976	B	(elected 1972)		(elected 1972)

Table 6: Elections to be held each year

Committees, Publications and Exhibits

	Board of Directors	Research Committee	Nomenclature Committee	Program Committee
Initial membership	Harlow (1971) Miller (1972) Bandura (1973) [A: Milgram]* [B: Albee]*	L. Tyler (1972) K. Clark (1973) J. Marmor (1974)	G. Albee (1972) J Spiegel (1974) R Spitzer (1976)	E. Hooker (1972) A. Anastasi (1973) P. Gebhard (1974)
Likely Actions 1971	Proclamations removing Homosexuality heard and sent to nomenclature Approve taskforces for Green and Bieber	Administer Shepard & Metzler Approve Seigelman, reject Watson	Accept charge to consider removing 302.0	Washington, DC
1972	Consider condemnation of Socarides (reject) Recognize Hooker Limit drugs to psychiatric, but recognize psychology access in hospital	Approve Rosehan. Fordney Settlage*	Propose observation, not theory-based DSM	Dallas
1973	Nomenclature report, send to general vote LT Principle	Approve Zimbardo, Spitzer	Propose dissolution in favor of Spitzer task force	Honolulu
1974	Create Psy. Of Women, Women in Psy. Bar Aversion therapy	Approve Milgram	[dissolved]	Philadelphia
1975	Create Affirmative Action plan	Propose rewritten Ethics guidelines		Chicago

If the gamemaster wishes to make a point about the influence of psychopharmacology and health insurance companies in the development of the DSM-III, he or she may wish to make use of the 'Exhibits' included in the "Call for papers and symposia" and hang up posters advertising Miltown, Tofranil, Librium and Valium. There are a great number of blogs and websites dedicated to storing and distributing these historical images. Here are a few:

Miltown: <http://www.homemakerblush.com/miltown-a-piece-of-1950s-homemaker-history/>

Tofranil: <http://adpharm.net/blog/?s=tofranal>

Librium: <http://www.mmm-online.com/med-ad-hall-of-fame-to-induct-lerner-girgenti-and-rubin/article/155796/>

Valium (1965): <http://www.entropy.in/valium-launch-advertisement/>

Valium: http://faculty.weber.edu/ewalker/Medicinal_Chemistry/topics/Psycho/psycho.htm (look for 'Valium Ads', there are three links).

At the same time, we should remember that Medicare and Medicaid were created in 1965, and the health insurance industry was being revolutionized at this time.

BlueCross 1960: <http://www.decodog.com/inven/MD/md28530.jpg>

Proposals to be brought before the Board

- Ad hoc committees:
 - history of treatment of homosexuality (proposed by Marmor, 1971)
 - taskforce on sexual deviation (proposed by Socarides, 1971)
 - Spitzer task force, dissolution of nomenclature committee (Spitzer, 1973)
- Removal of homosexuality (Marmor '71) (sent to nomenclature)
- Removal of homosexuality immediately (Spitzer '73)
- Creation of the Society for the Psychology of Women (Anastasi, 1973)
- Creation of the committee on Women in Psychology (Anastasi, 1973)
- Leona Tyler Principle (L Tyler, when president):

As citizens, members of the APA have the right to advocate for any cause through the myriad of political advocacy organizations, but when psychologists and psychiatrists speak for the profession through APA public stances and proclamations, it should be from science and professional experience.

On occasion psychiatrists are asked for an opinion about an individual who is in the light of public attention or who has disclosed information about himself/herself through public media. In such circumstances, a psychiatrist may share with the public his or her expertise about psychiatric issues in general. However, it is unethical for a psychiatrist to offer a professional opinion unless he or she has conducted an examination and has been granted proper authorization for such a statement.
- Hospital Privileges for Psychologists POSITION STATEMENT (1974)

Approved by the Board of Trustees, December 1970

This statement was prepared by the Committee on Psychiatry and Psychology.

Because of professional and legal considerations, the ultimate medical responsibility for patients admitted to hospitals should remain with licensed physicians. Psychologists, like other nonmedical professionals, should be eligible for some type of hospital appointment

- **Affirmative Action POSITION STATEMENT**

Approved by the Board of Trustees, December 1977 Approved by the Assembly of District Branches, October 1977

This statement was prepared by the Committee of Black Psychiatrists¹ and recommended by the Council on National Affairs

THERE IS a continuous need to increase the number of minority psychiatrists; the American Psychiatric Association has consistently demonstrated its commitment to the principle of affirmative action as reflected in its efforts of recruitment and training of minority psychiatrists. APA has previously developed and instituted policies recognizing and supporting the special mental health issues of minority populations; however, there are serious threats to affirmative action programs that have facilitated the following endeavors: APA reaffirms these commitments and policies by 1) issuing a public statement drawing attention to the potential deleterious effects that such threats pose to the delivery of health services to minority groups; 2) actively participating with other professional and educational groups to assure continued recruitment and training of minority candidates in medical disciplines; and 3) further exploring and developing, through its appropriate components, mechanisms to assure continued implementation of these commitments.

Research committee Issues

Unless otherwise noted, these should be brought to the research committee for discussion *by the gamemaster*. If Milgram and Zimbardo are not in the game, those will need to be brought as well. The actual papers should be made available to the students who will be presenting the data, if the activities are not actually performed (they are on <http://www2.mcdaniel.edu/pbradley/reacting/>).

1971:

- Shepard & Metzler's 'mental rotation of three-dimensional objects' task is already approved, the task should be presented to the students, and Miller prepped on presenting the data (you'll have to register for an account here: <http://opl.apa.org/Experiments/About/AboutMentalRotation.aspx>),
- Siegelman "Adjustment of Homosexual and Heterosexual Women" (likely approve) (**proposed by Barbara Gittings, if in game, if not, gamemaster**)
- Watson (1920). "Conditioned Emotional Reactions"

<http://psychclassics.yorku.ca/Watson/emotion.htm>* (likely reject) (**proposed by gamemaster**)

1972:

- Rosehan (1973). "On being sane in insane places"
- Fordney Settlege (1973). [citation DS Fordney Settlege, Baroff S, Cooper D 1973. Sexual experience of younger teenage girls seeking contraceptive assistance for the first time. *Family Planning Perspectives*, Vol. 5, No. 4 Autumn, 1973, p 223-226] (available on Jstor)] (**proposed by Fordney Settlege, if in game, if not gamemaster**) (likely approve)

1973:

- Zimbardo [full citation is Haney, Banks & Zimbardo (1973).] (**proposed by zimbardo, if in game, if not, gamemaster**) (likely approve, will need to rewrite Ethical guidelines as result)
- Spitzer & Fleiss (1973). "A Re-Analysis of the Reliability of Psychiatric Diagnosis" (**proposed by Spitzer**) (likely approve)**

1974:

- Milgram 'small world' [Full citation Travers & Milgram (1969). "An Experimental Study of the Small World Problem"] (**proposed by Milgram if in game, if not gamemaster**) (likely approve)

*Students may recognize this experiment, although I don't use the name 'little albert' in the description. They will also probably find the experiment unethical. Many people do. It is important *not* to salve that response with the standard myth that Watson deconditioned Albert after the experiment: there is no evidence that he did, or that he ever intended to. Thus, my version of the proposed experiment contains no plan for deconditioning Albert. See the 'Actual History' section below for citations.

**1973-1974: Spitzer proposes to calculate Cohen's Kappa for existing measures of reliability of psychiatric diagnosis. If the student is skilled in basic statistics, and has access to the medical literature, he or she should be encouraged to replicate the study. If this is an intro-level class without statistics, the student can present a research report of the actual study, which is available via pubmed DOI 10.1192/bjp.125.4.341

Of course, Little Albert and Rosehan cannot be completed by actual students. If the research committee approves those experiments, the instructor should charge a student with presenting the original papers during the follow years' conference.

Activities

Various students should be tasked with presenting proposals for research to the research committee, conducting that research if it is chosen, and presenting the findings at the following conference. Not everything proposed can be carried out in an undergraduate classroom. Where it is impossible, the instructor should distribute the actual paper for evaluation *as if* it had been carried out. The instructors is, of course, encouraged to use classroom activities with which he or she is familiar.

I've pulled a number of experiments from the APA's *Activities Handbook for the Teaching of Psychology* v. 1-4 that correspond to many of the topics the class will be discussing. They are listed

here, and attached as PDFs at the end of this document, if you do not have access to the *Handbooks*. The characters listed here are *suggestions*. The instructor should distribute these as he or she sees fit.

Note: Milgram and Zimbardo, if they are in the game, are directly instructed to propose experiments to the research committee ('small world' and 'prison' respectively). Spitzer and Fordney Settlege also have instructions to present studies based on their character's actual work.

Title, author	Location in APA Handbooks	Suggested character, conference
Accuracy of Observation, Paul J. Woods	v. 1,#2	Tyler or Anastasi 1971
Operant Conditioning: Role in Human Behavior, Edward Stork	v. 1,#23	Harlow
Operant Conditioning Demonstration, Patricia Keith-Spiegel	v. 1,#24	Harlow or Hooker
Defense Mechanisms, Jack J Greider	v. 1,#75	Spiegel
To Sleep, Perchance to Dream, Ludy T. Benjamin, Jr.	v. 1,#80	Marmor
Mental Illness, James M. Gardner	v. 1,#81	Lief or Fryer
JAWS: Demonstrating Classical Conditioning, Randolph A Smith	v. 2,#19	Harlow or Hooker
Human Operant Conditioning, John K. Bare	v. 2,#20	Harlow or Hooker
Bringing the Clinic Into the Undergraduate Classroom, David M. Young	v. 3,#45	Someone on the Spitzer Task force, 1974-1975
Discovering the Relationship Between Operational Definitions and Interobserver Reliability, Angela H. Becker	v. 4,#15	Could be instead of Spitzer, 1973, or in combination
Information Processing Capacity: A Visual Demonstration of the Magical Number Seven, Fairfid M. Caudle	v. 4,#43	Marr or Miller
The Role of Prior Information in Dream Analysis, Douglas A. Bernstein	v.. 4,#80	Marmor, after his 1972-1973

****1973-1974:** Spitzer proposes to calculate Cohen's Kappa for existing measures of reliability of psychiatric diagnosis. If the student is skilled in basic statistics, and has access to the medical literature, he or she should be encouraged to replicate the study. If this is an intro-level class without statistics, the student can present a research report of the actual study, which is available via pubmed DOI 10.1192/bjp.125.4.341

Of course, Little Albert and Rosehan cannot be completed by actual students. If the research committee approves those experiments, the instructor should charge a student with presenting the original papers during the follow years' conference.

Papers to be distributed (if activities are approved)

All are available on <http://www2.mcdaniel.edu/pbradley/reacting/>

1971: Shepard, R. N., & Metzler, J. (1971). Mental rotation of three-dimensional objects. *Science*, 171, 701-703.

1972: Siegelman, "Adjustment of Homosexual and Heterosexual Women" *The British Journal of Psychiatry* (1972) 120: 477-481.

1973: Rosehan 'On being sane in Insane places' *Science* v.. 179 (Jan. 1973), 250-258

1974:

- Haney, C. Banks, C. & Zimbardo, P. (1973). "Interpersonal Dynamics in a Simulated Prison" *International Journal of Criminology and Penology* 1, p. 69-97
- Spitzer, R. and Fleiss, J. (1974). "A Re-analysis of the Reliability of Psychiatric Diagnosis" *Brit. J. Psychiat.* 125, 341-7

1975:

Conference Schedule for 1971

Presidential Address: Dr. G. Miller “The Future of Psychology”

Distribution of proposals to be considered this year:

J. Marmor: proposal to remove 'homosexuality' from the DSM-II (302.0)

C. Socarides & I. Beiber: proposal to create taskforce on sexual deviation

J. Spiegel and/or R. Green: proposal to create task force of historical study and literature review of homosexuality in psychology and psychiatry.

Symposium “Psychiatry: Friend or Foe to Homosexuals: A Dialogue”

Dr. E. Hooker “The mental health of non-patient male homosexuals.”

Dr. H. Anonymous, “I am a homosexual and a psychiatrist.”

F. Kameny and/or B. Gittings “Gay, Proud and Healthy”*

Papers:

Dr. T. Szasz “The Myth of Mental Illness”

Dr. J Marmor “Limitations of Free Association”

General business meeting agenda:

Committee Reports

Research	Dr. Tyler
Nomenclature	Dr. Spitzer
Conference	Dr. Hooker

Old Business

New Business:

Discussion:

Proposal from J. Marmor

Proposal from C. Socaridies / I. Beiber

Proposal from G. Albee.

Nominations and elections for:

Vice President 1972.

Replacement for Milgram, member at large on the Board of Directors.*

*only in a large class

Proposals for the Research Committee

Emotional responses in a human child.

Background: Many psychologists--Freud included--have held, with little evidence in support, that the human mind is built on a variety of instincts, such as self-preservation, sexual activity, etc. Emotional responses to fearful stimuli, such as rats and spiders, is commonly considered to be innate, possibly as a result of evolutionary pressures to avoid infectious or poisonous creatures. This experiment seeks to condition a fear-response in a human infant, thus establishing that there is no need for theoretical innate entities in our explanation of emotion in humans.

Rationale: The success of Pavlov's work conditioning reflex responses to novel stimuli in canines has shown that behaviors previously believed to be instinctual are likely to have resulted from conditioning. The current experiment seeks to determine if that insight can be extended to humans, by conditioning a emotional response in a child—fear—that is widely believed to be instinctual. Demonstrating that these reflexes can appear without appeal to 'instinct' or 'adaptation' undermines the need for theoretically innate entities in our understanding of human behavior.

Experimental Design: A child of a single destitute mother, currently employed as a wet nurse at a local hospital (Hopkins), has been recruited for the experiment. Given the nature of his mother's employment, the child is familiar with the clinical setting of a hospital, and hence an ideal subject for this experimental protocol. Previous work with this subject at the age of 8 months has demonstrated that he exhibits fear-like responses to loud sounds: the experimenter stood behind the subject, outside of eye sight and struck a steel bar with a hammer. On the first presentation, the subject startled and raised his hands. On the second, he began to tremble. On the third, he cried and seemed to be having a fit.

The experimenter proposes the following:

At 9 months of age, we will present the subject with (randomly): a white rat, a rabbit, a dog, a monkey, with masks with and without hair, cotton wool, and burning newspapers. Given the child's upbringing, it is unlikely that he has ever encountered any of these objects before. We expect him to have no emotional response to any of them, but if he responds, that object will be removed from the study before proceeding.

At the age of 11 months, one of the objects will be presented to him again. When he moves towards contact with the object, the experimenter will make the loud noise already established as causing a fear reaction. Each movement towards the stimulus object will cause another loud noise stimulus. Once the fear reaction is well conditioned, the experimenter will present the subject with the fear-conditioned object and record the response. The child's reaction than will be compared with other similarly-aged children's reaction for typicality of fear-reactions in children.

The fear-conditioned object will be reintroduced over the subsequent weeks and months at regular intervals to determine the persistence of the conditioned response.

Significance and Contribution

This research has the potential to experimentally confirm or deny the commonly held belief that the fear response is innate, or at least instinctual. Pavlov's experiments with classical conditioning in dogs has shown that reflexes that were previously believed to be instinctual—such as salivation—could be

conditioned in response to novel stimuli. If Pavlov's approach is to be applied to humans, it is incumbent that psychologists determine the existence and nature of human instinctual reactions, and if they can be conditioned like those of the canine.

References

Pavlov, I. P. (1927). Conditioned Reflexes: An Investigation of the Physiological Activity of the Cerebral Cortex.

Mental rotation of three-dimensional objects

Background: Mentally rotating 3-dimensional objects is one indicator of spatial reasoning in humans. And it is one that is tempting to explain in terms of internal mental imagery. The 'cognitive hypothesis' holds that in order to solve mental rotation problems, a cognitive representation of the presented object must be rotated in the mind before an identification can be made - and it is that hypothesis that we wish to test here.

Rationale: When asked to match three-dimensional objects presented in two-dimensional format, individuals report imagining the object in three-dimensions and rotating them mentally to test against the other possibilities. Introspective reports are, of course, notoriously difficult to address in a scientific way, but that does not mean that we cannot study the phenomenon. If individuals are manipulating mental representations, we would expect a measurable difference in reaction time given a matching task.

Experimental Design: A number of adult subjects (the size of the class) will be presented with pairs of two-dimensional line drawings of three-dimensional blocks. Each subject will be asked to indicate as quickly as possible if the two were drawings of the same object rotated in space or different objects. Half of the experimental set will be rotated versions of the same object, the other half not. They will be presented to the subjects in random order. The time it takes to respond will be measured using computer software. We hypothesize that the amount of time necessary to respond will be correlated with the angle of rotation of the two objects, thus establishing the cognitive hypothesis.

The materials are available on the APA website:

<http://opl.apa.org/Experiments/About/AboutMentalRotation.aspx> Your gamemaster will need to set up an account here: <http://opl.apa.org/Main.aspx>.

Significance and Contribution

This research has the potential to discover observable data that is consistent with the introspective reports of individuals.

On Being Sane in Insane Places

Background

However much mental health practitioners may be personally convinced that we can tell the normal from the abnormal, the evidence is simply not compelling. It is commonplace, for example, to read about murder trials wherein eminent psychiatrists for the defense are contradicted by equally eminent psychiatrists for the prosecution on the matter of the defendant's sanity. More generally, there are a great deal of conflicting data on the reliability, utility, and meaning of such terms as “sanity,” “insanity,” “mental illness” and “schizophrenia.” Finally, as early as 1934, Ruth Benedict suggested that normality and abnormality are not universal. What is viewed as normal in one culture may be seen as quite aberrant in another.

Rationale

How do we know precisely what constitutes “normality” or mental illness? Conventional wisdom suggests that specially trained professionals have the ability to make resolutely accurate diagnoses. In this research, however, we intend to challenge that assumption. What is—and what is not-- “normal” may have to do with the labels that are applied to people in particular settings.

Experimental Design

Eight sane people, of varied backgrounds, will gain secret admission to 12 different hospitals, from varied geographical regions of the United States. Their diagnostic experiences will constitute the data of the study. The 'pseudopatients' will call the hospital for an appointment, complaining of 'hearing voices.' When asked what the voices said, they will reply that it was unclear, but that they were 'empty,' 'hollow,' and 'thud.' The pseudopatients will report that voices were unfamiliar and in the same gender as the pseudopatient. After admission to the psychiatric ward, the pseudopatient will cease simulating symptoms of abnormality.

The amount of time it takes for the pseudopatient to be released, along with any diagnoses and treatments, will be recorded.

Significance and Contributions

This study provides an opportunity to test the reliability of psychiatric diagnosis in the 'real world,' rather than the controlled environment of a university lab. The hospital environment imposes a special environment on its members in which the actions of a normal person could be misinterpreted as 'insane' or 'abnormal.' This study will determine the extent of that influence on psychiatric diagnosis.

Works Cited

R. Benedict, *J. Gen. Psychol.*, 10 (1934), 59.

Adjustment of Homosexual and Heterosexual Women

Background The traditional psychiatric belief that homosexual men are emotionally unstable has recently been challenged by Evelyn Hooker's study of non-prisoner non-patient homosexual men. There have been a few similar studies on women. The contention that homosexual women are neurotic has typically been voiced by clinicians reporting on their own patients. One exception is the recent psychometric investigation by Kenyon (1968) who studied a non-clinical group of English homosexual women, and concluded that they were higher in neuroticism than a comparison group of heterosexuals. In contrast to the 'illness' notion of homosexuality, the authors of three psychometric studies dealing with non-clinical homosexuals and heterosexuals reported that heterosexual women were not better adjusted than homosexuals. (Armon, 1960; Freedman, 1968;

Rationale

The paucity of research in this area is exemplified by the fact that a total of only four studies, noted above, have been found to date. Even the clinical literature, which is replete with case studies and therapeutic discussions concerning male homosexuality, is strikingly sparse in the area of lesbianism. The present study is proposed to add to the small body of data we now have on the adjustment of homosexual versus heterosexual women.

Experimental Design

Working with the leadership of the New York branch of the Daughters of Bilitis, a questionnaire will be sent out to recruit members for the study. And additional questionnaire will be distributed through a popular homophile bookstore in Greenwich Village, New York. And equivalent number of heterosexual women will be recruited from the undergraduate and graduate population of local colleges and universities.

Several different instruments will be used to measure the overall psychological adjustment of the participants, including Scheier and Cattal's Neuroticism Scale Questionnaire (NSQ) (1961) tests of Alienation and Trust (Struening & Richardson, 1965), Goal Directedness, Self-Acceptance and Sense of Self (Dignan, 1965), Dependency (Comry, 1964), Nurturance (Harvey et al. 1966) and Neuroticism (MacGuire 1966). The Crowne and Marlow Social Desirability Scale (1960) will also be used. The differences on these measures between the homosexual and heterosexual women will be compared to test the 'illness' model of homosexuality in women..

Significance and Contribution

Recent interest in and discussions of the 'illness' model of male homosexuality have almost completely ignored the parallel issues for homosexual women. This study is a small step towards closing that gap.

Works Cited.

- Armon, V. (1960) "Some personality variables in overt female homosexuality." *Journal of Protective Techniques*, 24, 292-309
- Freedman, M.J. (1968) "Homosexuality among women and psychological adjustment." *Dissertation Abstracts*, 28, 4294B.

Hopkins, J.H. (1969). "The lesbian personality" *British Journal of Psychiatry*, 115, 1433-6

Kenyon, F.E. (1968). "Studies in female homosexuality: IV. Social and psychiatric aspects." *British Journal of Psychiatry*, 114, 1337-50.

Psychometric Tests

Scheier, I. H. & Cattell, R.B. (1961). *The Neuroticism Scale Questionnaire*, Champaign, Ill: Institute for Personality and Ability Testing

Struening, E.I. & Richardson, A.H. (1965). "A factor analytic exploration of the alienation, anomia and authoritarian domain." *American Sociological Review*, 30, 768-78.

Dignan, M.H. (1965). "Ego identity and maternal identification" *Journal of Personality and Social Psychology* 1, 476-83

Comry, A.L. (1964). "Personality factors compulsion, dependence hostility and neuroticism." *Educational and Psychological Measurement*, 24, 75-84

Harvey, O.J., Prather, M.S. White, J. and Alter, R.D. (1966). "Teachers' belief systems and preschool atmospheres" *Journal of Educational Psychology* 57, 373-81

McGuire, R.G. (1966). "An inquiry into attitudes and value systems of a minority group." Unpublished Doctoral Dissertation, NYU

Crowne, D.P. & Marlowe, D. (1960). "A new scale of social desirability independent of psychopathology." *Journal of Consulting Psychology*, 24, 349-54

A Re-analysis of the Reliability of Psychiatric Diagnosis

Introduction

Classification systems such as diagnosis have two primary properties, reliability and validity. Reliability refers to the consistency with which subjects are classified; validity, to the utility of the system for its various purposes. In the case of psychiatric diagnosis, the purposes of the classification system are communication about clinical features, aetiology, course of illness and treatment. A necessary constraint on the validity of the system is its reliability. There is no guarantee that a reliable system is valid, but assuredly an unreliable system must be invalid.

Background

Studies of the reliability of psychiatric diagnosis provide information on the upper limits of its validity. This study will consider some of the difficulties in appraising diagnostic reliability, offers a re-analysis of the available data from the literature, and suggests a possible course of action to improve psychiatric diagnosis.

Rationale

Zubin (1967) reviewed the major studies of reliability of psychiatric diagnosis performed until 1966. He noted that diagnostic reliability is referred to in three different ways: agreement between independent diagnosticians examining the same patients, stability in diagnosis over time, and similarity in diagnostic frequencies for comparable samples. It is the first sense—interjudge agreement—that is fundamental.

Recent studies of interjudge agreement of psychiatric (Schmidt and Fonda, 1956; Kreitman, 1961; Beck et al., 1962; Sandifer et al., 1964) report on agreement as to the presence or absence of a diagnosis, but they neglect to consider the rate at which diagnoses are made.

Cohen (1960) has recently developed a statistical measure (called 'kappa') of interjudge agreement that incorporates a correction for chance agreement. This study proposes to recalculate the reliability of psychiatric diagnosis from these studies based on Cohen's Kappa.

Experimental Design

The study will use existing data, culled from five recent papers measuring the interjudge agreement of psychiatric diagnosis.

Significance and Contributions

There is little doubt that the reliability of psychiatric diagnosis is being questioned at this time. If the presumed agreement of previous work depends merely on the rate of chance agreement, psychiatry must reevaluate its classification system immediately.

Works Cited

- Cohen, J. (1960) "A coefficient of agreement for nominal scales." *Educ. Psychol. Measmt.*, 20, 37-46.
- Beck, A.T., Ward, C.H., Mendelson, M., Mock, J.E., & Erbaugh, J.K. (1962). "Reliability of psychiatric diagnosis: 2. A study of consistency of clinical judgments and ratings." *Amer. J. Psychiat.*, 119, 351-7
- Sandifer, M.G., Pettus, C. & Quade, D. (1964). "A study of psychiatric diagnosis." *J nerv. ment. Dis.*,

139, 350-6

Kreitman, N. (1961) "The reliability of psychiatric diagnosis" *J. ment. Sci.* 107, 876-86.

Schmidt, H.). & Fonda, C.P. (1956). "The reliability of Psychiatric Diagnosis: A new look" *J. abnor. soc., Psychol.* 52, 262-7

Zubin J. (1967) "Classification of the behavior disorders" in *Annual Review of Psychology* (eds. P. R. Farnsworth & O. McNemar). Palo Alto, California, *Annual Reviews*, pp. 373-406.

Interpersonal Dynamics in a Simulated Prison

Background

After he had spent four years in a Siberian prison the great Russian novelist Dostoevsky commented, surprisingly, that his time in prison had created in him a deep optimism about the ultimate future of mankind because, as he put it, if man could survive the horrors of prison life he must surely be a “creature who could withstand anything.” In the century which has passed since Dostoevsky’s imprisonment, little has changed to render the main thrust of his statement less relevant. Although we have passed through periods of enlightened humanitarian reform, in which physical conditions within prisons have improved somewhat and the rhetoric of rehabilitation has replaced the language of punitive incarceration, the social institution of prison has continued to fail. On purely pragmatic grounds, there is substantial evidence that prisons neither “rehabilitate” nor act as deterrent to future crime—in America, recidivism rates upwards of 75% speak quite decisively to these criteria. On humanitarian grounds as well prisons have failed: our mass media are increasingly filled with accounts of atrocities committed daily, man against man, in reaction to the penal system or in the name of it. The prison undeniably creates, almost to the point of cliché, an intense hatred and disrespect in most inmates for the authority and the established order of society into which they will eventually return. And the toll which it takes on the deterioration of human spirit for those who must administer it, as well as for those upon whom it is inflicted is incalculable.

Rationale

Attempts to provide an explanation of the deplorable condition of our penal system and its dehumanizing effects upon prisoners and guards, often focus upon what might be called the *dispositional hypothesis*. While this explanation is rarely expressed explicitly, it is central to a prevalent non-conscious ideology: that the state of the social institution of the prison is due to the “nature” of the people who administer it, or the “nature” of the people who populate it, or both. That is, a major contributing cause to despicable conditions, violence, brutality, dehumanization and degradation existing with any prison can be traced to some innate or acquired characteristic of the correctional and inmate population.

The dispositional hypothesis has been embraced by the proponents of the prison *status quo* (blaming conditions on the evil in the prisoners), as well as by its critics (attributing the evil to guards and staff with their evil motives and deficient personality structures). A critical evaluation of the dispositional hypothesis cannot be made directly through observation in existing prison settings, since such naturalistic observation necessarily confounds the acute effects of the environment with the chronic characteristics of the inmate and guard populations. To separate the effects of the prison environment *per se* from those attributable to a priori dispositions of its inhabitants requires a research strategy in which a “new” prison is constructed, comparable in its fundamental social-psychological milieu to existing prison systems, but entirely populated by individuals who are undifferentiated in all essential dimensions from the rest of society.

Experimental Design

Interpersonal dynamics in a prison environment are to be studied experimentally by designing a functional simulation of a prison in which subjects role-play prisoners and guards for an extended period of time. To assess the power of the social forces on the emergent behavior in this situation,

alternative explanations in terms of pre-existing dispositions are to be eliminated through subject selection. A homogeneous, “normal” sample is to be chosen after extensive interviewing and diagnostic testing of a large group of volunteer male college students. Half of the subjects are to be randomly assigned to role-play prison guards for eight hours each day, while the others role-play prisoners incarcerated for nearly one full week. Neither group will receive any specific training in these roles. The primary investigator will role-play the prison warden, and consultants from the real prison population (both prisoners and prison officials) will be recruited to assist in the planning and implementation of the prison environment.

Continuous, direct observation of behavioral interactions will be supplemented by video-taped recording, questionnaires, self-report scales and interviews. All these data sources are likely to converge on the conclusion that this simulated prison will develop into a psychologically compelling prison environment.

Significance and Contributions

The authors believe that this demonstration will reveal new dimensions in the social psychology of imprisonment worth pursuing in future research. In addition, this research will provide a paradigm and information base for studying alternatives to existing guard training, as well as for questioning the basic operating principles on which penal institutions rest. There is great need today for prison reforms that recognize the dignity and humanity of both prisoners and guards who are constantly forced into one of the most intimate and potentially deadly encounters known to man. This study has the potential to inform those reforms.

Works Cited

Further Resources

Actual presidents:

1969	George A. Miller, PhD	
1970	George W. Albee, PhD	
1971	Kenneth B. Clark, PhD	1 st African-American, only president born in the Panama Canal zone
1972	Anne Anastasi, PhD	1st woman since 1921
1973	Leona E. Tyler, PhD	Received PhD at youngest age (21) of any APA President
1974	Albert Bandura, PhD	3 rd Canadian
1975	Donald T. Campbell, PhD	

Hogan, J.D. (1994) “G. Stanley Hall and Company: Observations on the First 100 APA Presidents” *Annals of the New York Academy of Sciences* 30(727), p. 133-138

Actual history

Little Albert

Contrary to most textbooks that repeat the myth that 'Little Albert' was successfully deconditioned by Watson, was adopted by a family in North Baltimore and went on to live a long, happy, normal life; there is recent evidence to suggest that Little Albert died as a child.

Using photographs from the family and FBI forensics experts, Beck et al. (2009) argue that 'Little Albert' was likely Douglas Merritte, who died at age 6 of acquired hydrocephalus, after his mother had left Hopkins. Watson never deconditioned Little Albert, and we simply have no evidence to determine if his conditioned fears remained until his death.

See Beck, H. P., Levinson, S., & Irons, G. (2009). "Finding Little Albert: A Journey to John B. Watson's Infant Laboratory." *American Psychologist*, 64, 605-614. doi: [10.1037/a0017234](https://doi.org/10.1037/a0017234). The authors conclude:

None of the folktales we encountered during our inquiry had a factual basis. There is no evidence that the baby's mother was 'outraged,' at her son's treatment or that Douglas's phobia proved resistant to extinction. Douglas was never deconditioned, and he was not adopted by a family north of Baltimore.

Nor was he ever an old man. Our search of seven years was longer than the little boy's life. I laid flowers on the grave of my longtime 'companion' turned, and simultaneously felt a great peace and profound loneliness.

The APA's *Monitor* carried the story January 2010, 41(1): <http://www.apa.org/monitor/2010/01/little-albert.aspx>.

There were a number of blog posts that followed, including: <http://mindhacks.com/2009/10/22/little-albert-lost-and-found/>.

Socarides & Bieber

The dates I used in the introduction are not exact, although I've tried to remain faithful where I could. Part of the problem here is that many of the stories that are circulated, even by eyewitnesses, vary. Ron Gold, for example, dates the events in Hawaii to 1972, but the APA records the 1972 conference in Dallas, and the Hawaii conference to 1973.

The Dr. H. Anonymous speech actually happened in 1972 during a symposium titled "Psychiatry: Friend or Foe to Homosexuals: A Dialogue". It also featured Kameny and Gittings in addition to John Fryer. In 1971, Kameny, Gittings and The panel titled "Lifestyles of non-patient homosexuals," which the participants joking referred to as "Lifestyles of impatient homosexuals." It featured Larry Littlejohn of the Society for Individual Rights in San Francisco, Del Martin, a founder the Lesbian activist organization Daughters of Bilitis, Lilli Vincenz, another lesbian activists, and Jack Baker, the gay president-elect of the student body of the University of Minnesota.⁷ I've found a number of websites and personal stories that get these two distinct events confused. At the risk of perpetuating these confusions, I've combined them into a single event in 1971.

⁷ See Bayer, R. (2002). p. 106

Socarides petitioned the New York District branch for his task force on sexual deviation. It was granted, and his report filed in 1972. The leadership rejected the report, on the grounds that its basis in psychoanalytic theory was unacceptable.

Complicating matters is the existence of NARTH, which has been adopted by many on the religious right in recent years. In 1995, Socarides gave an interview to the NY Times, promoting his book "Homosexuality: A Freedom Too Far - A Psychoanalyst Answers 1,000 Questions About Causes and Cure and the Impact of the Gay Rights Movement on American Society", in which he claimed that the declassification occurred because of political pressure and not scientific evidence. The themes of the interview will be familiar to anyone with even tangential knowledge of the rhetoric of the far right: persecution of conservatives, liberal media bias, gay agendas and conspiracies, etc. His son, Richard Socarides, who is gay, became a gay activist, advised President Clinton on LGBT issues, and ultimately was elected to the presidency of the activist organization 'Equality Matters.' That fact has led many defenders of Socarides to accuse any press figure who mentions it of making an 'ad hominem' attack against Socarides.

NARTH continues today under the directorship of Socarides' student Nicolosi.

The UK Newspaper 'The Independent' ran a story in January 2010 by Patrick Strudwick about his experience in gay-to-straight conversion program inspired by Nicolosi. The story created a national concern about psychiatrists in the UK who still may be offering psychotherapy to 'treat' or 'cure' homosexuality. The story is available here: <http://www.independent.co.uk/life-style/health-and-families/features/the-ex-gay-files-the-bizarre-world-of-gaytostraight-conversion-1884947.html>

Leona Tyler Principle / Goldwater Rule

Following the Goldwater affair, the American Psychiatric Association added section 7.3 to their *The Principles of Medical Ethics With Annotations Especially Applicable to Psychiatry*, which states:

On occasion psychiatrists are asked for an opinion about an individual who is in the light of public attention or who has disclosed information about himself/herself through public media. In such circumstances, a psychiatrist may share with the public his or her expertise about psychiatric issues in general. However, it is unethical for a psychiatrist to offer a professional opinion unless he or she has conducted an examination and has been granted proper authorization for such a statement.

This section has become known as 'The Goldwater Rule.' For a full history, see Mayer, John D. (2010) "The Goldwater Rule: The rationale of the Goldwater Rule" Psychology Today Blog (<http://www.psychologytoday.com/blog/the-personality-analyst/201005/the-goldwater-rule>)

The American Psychological Association adopted 'Leona Tyler principle' was adopted in 1973 by the American Psychological Association, and still holds today. It states:

As citizens, members of the APA have the right to advocate for any cause through the myriad of political advocacy organizations, but when psychologists and psychiatrists speak for the profession through APA public stances and proclamations, it should be from science and professional experience.

The principle was named for Leona Tyler simply because she was president at the time, not necessarily because she advocated for it, as she does in this game.

Marr

David Marr joins Miller and Chomsky at MIT in 1977 and then dies in 1980 of Leukemia. His posthumously published book *Vision* is still standard reading in cognitive science courses.

Declassification

The story of the declassification of homosexuality as a mental illness has been retold a couple of times in recent years. Famously, Alix Spiegel, grandson of John P. Spiegel, produced a version of the story for NPR's show 'This American Life'. The episode, named '81 words' is available online at <http://www.thisamericanlife.org/radio-archives/episode/204/81-words>. It is an excellent retelling of these events, and partially inspired this game. Ron Gold's retelling of the event is available here: <http://www.queerstories.org/custom.html>.

In the character sheet for Spitzer, I express some doubts about the standard story told by Spiegel, because Spitzer's timing and motivation for inserting himself into the controversy doesn't seem to match up for normal person. In a 2005 issue of *The New Yorker Magazine*, Spiegel writes that

Despite Spitzer's genius at describing the particulars of emotional behavior, he didn't seem to grasp other people very well. Jean Endicott, his collaborator of many years, says, "He got very involved with issues, with ideas, and with questions. At times he was unaware of how people were responding to him or to the issue. He was surprised when he learned that someone was annoyed. He'd say, 'Why was he annoyed? What'd I do?'" After years of confrontations, Spitzer is now aware of this shortcoming, and says that he struggles with it in his everyday life. "I find it very hard to give presents," he says. "I never know what to give. A lot of people, they can see something and say, 'Oh, that person would like that.' But that just doesn't happen to me. It's not that I'm stingy. I'm just not able to project what they would like." Frances argues that Spitzer's emotional myopia has benefitted him in his chosen career: "He doesn't understand people's emotions. He knows he doesn't. But that's actually helpful in labeling symptoms. It provides less noise."⁸

If this is correct, my argument about the implausibility of the Chair of the Nomenclature Committee attending Socarides' speech in New York without expectation of a demonstration may be wrong. I leave it in, because a student playing the part needs to think himself or herself into Spitzer's position, not his particular characteristics—and whatever unique mind Robert Spitzer has, it is probably uncommon in undergraduates.

Spitzer Task force

See ch 3 of Kutchins & Kirk (2003) *Making Us Crazy*.

Homodysphilia was proposed by Spitzer without consultation with the subcommittee on human sexuality. Green sent Spitzer a strongly worded criticism of both the classification and the method Spitzer used to introduce it and resigns in protest. Spitzer constructs a 'survey' instrument that he sends out to the entire taskforce and finds that there isn't enough agreement on the issue to leave it with the subcommittee, and presents the idea to the entire taskforce, thus outmaneuvering Green. The committee narrowly approves 'ego-dystonic homosexuality', but isn't thrilled. Judd Marmor, who voted in favor, writes later that he would have preferred no mention of homosexuality, but politics required it.

Averson Therapy

⁸ The article is available at <http://metzself.info/articles/Spitzer.html>

(from wikipedia) Since 1994, the American Psychological Association has declared that aversion therapy is a dangerous practice that does not work.[citation needed] Since 2006, the use of aversion therapy to treat homosexuality has been in violation of the codes of conduct and professional guidelines of the American Psychological Association and American Psychiatric Association. The use of aversion therapy to treat homosexuality is illegal in some countries. The standard in psychotherapy in America and Europe is currently Gay Affirmative Psychotherapy. Guidelines for Gay Affirmative Psychotherapy can be found by APA. [4]

From Issues in Psychotherapy with Lesbian and Gay Men: A Survey of Psychologists. Linda Garnets, Los Angeles, CA Kristin A. Hancock, Berkeley, CA Susan D. Cochran, California State University, Northridge Jacqueline Goodchilds, University of California, Los Angeles Letitia Anne Peplau, University of California, Los Angeles. Report of the APA. <http://search.apa.org/search?facet=classification%3aSexuality|classification%3aTherapy&query=Aversion%20Therapy>

In 1975, the American Psychological Association (APA) took a strong stance regarding bias toward lesbians and gay men, resolving that homosexuality per se implies no impairment in judgment, reliability or general social and vocational abilities (see Appendix A for the full text of the resolution). The APA urged psychologists to take the lead in removing the stigma of mental illness long associated with homosexual orientations (Conger, 1975). In recent years, attention has been drawn to ways in which a client's ethnicity, gender, sexual orientation, or physical disability can affect clinical judgment and treatment strategies. There has been a corresponding effort to develop guidelines to help practitioners avoid bias in psychotherapy (APA, 1975). Recognizing that practice does not spontaneously or quickly follow policy changes, the Committee on Lesbian and Gay Concerns (CLGC), sponsored jointly by the Board of Social and Ethical Responsibility in Psychology (BSERP) and the Board of Professional Affairs (BPA), formed a task force in 1984 to investigate the range of bias that may occur in psychotherapy with lesbians and gay men. This article is an abridged report of the task force's research, findings, and recommendations.

Reparative therapy

rejected repeatedly by the APA, most recently in 2008.

Evelyn Hooker

E. Hooker was given 1991 Award for Distinguished Contribution to Psychology in the Public Interest, presented by the American Psychological Association. The citation read:

"When homosexuals were considered to be mentally ill, were forced out of government jobs, and were arrested in police raids, Evelyn Hooker courageously sought and obtained research support from the National Institute of Mental Health (NIMH) to compare a matched sample of homosexual and heterosexual men. Her pioneering study, published in 1957, challenged the widespread belief that homosexuality is a pathology by demonstrating that experienced clinicians using psychological tests widely believed at the time to be appropriate could not identify the nonclinical homosexual group. This revolutionary study provided empirical evidence that normal homosexuals existed, and supported the radical idea then emerging that homosexuality is within the normal range of human

behavior. Despite the stigma associated with homosexuality, she received an NIMH Research Career Award in 1961 to continue her work. In 1967, she became chair of the NIMH Task Force on Homosexuality, which provided a stamp of validation and research support for other major empirical studies. Her research, leadership, mentorship, and tireless advocacy for an accurate scientific view of homosexuality for more than three decades has been an outstanding contribution to psychology in the public interest."

She reflects on the award here: http://psychology.ucdavis.edu/rainbow/html/hooker_address.html

1997 resolution: <http://psychology.ucdavis.edu/rainbow/HTML/resolution97.html>

The DSM-V Controversy

These were collected in 2009. The issue is ongoing.

NIMH Rejection: <http://www.newyorker.com/online/blogs/elements/2013/05/the-new-criteria-for-mental-disorders.html>

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